

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35744

FILED
Apr 04, 2012
Secretary of State

Entity Name: THE FALLS AT SAWGRASS VILLAGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

ASSOCIATION MANAGEMENT OF PONTE VEDRA
3108 SAWGRASS VILLAGE CIRCLE
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

ASSOCIATION MANAGEMENT OF PONTE VEDRA
3108 SAWGRASS VILLAGE CIRCLE
PONTE VEDRA BEACH, FL 32082 US

Current Mailing Address:

ASSOCIATION MANAGEMENT OF PONTE VEDRA
3108 SAWGRASS VILLAGE CIRCLE
PONTE VEDRA BEACH, FL 32082

New Mailing Address:

ASSOCIATION MANAGEMENT OF PONTE VEDRA
3108 SAWGRASS VILLAGE CIRCLE
PONTE VEDRA BEACH, FL 32082 US

FEI Number: 59-3033952

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONNOLLY, C. P.
ASSOCIATION MANAGEMENT OF POINT VEDRA, INC
3108 SAWGRASS VILLAGE CIRCLE
PONTE VEDRA BEACH, FL 32082 US

Name and Address of New Registered Agent:

CONNOLLY, C. P.
ASSOCIATION MANAGEMENT OF PONTE VEDRA, INC
3108 SAWGRASS VILLAGE CIRCLE
PONTE VEDRA BEACH, FL 32082 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: C. P. CONNOLLY

04/04/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DVP
Name: WHEAT, CAROLYN
Address: 144 N. ROSCOE BLVD
City-St-Zip: PONTE VEDRA BCH, FL 32082

Title: DST
Name: HARTFORD, JOHN
Address: 3202 SAWGRASS VILLAGE CIRCLE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: DP
Name: HANA, RICHARD
Address: 3207 SAWGRASS VILLAGE CIRCLE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: C. P. CONNOLLY

RA

04/04/2012

Electronic Signature of Signing Officer or Director

Date