

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N50961

**FILED**  
**Jan 19, 2012**  
**Secretary of State**

**Entity Name:** THE BLUFFS AT ST. GEORGE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

1516 WINDY PASS  
ST. GEORGE ISLAND, FL 32328

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1837  
TALLAHASSEE, FL 32302

**New Mailing Address:**

**FEI Number:** 59-3170622

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MATALON, ELI  
1466 LEO AVE  
TALLAHASSEE, FL 32303 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: VP  
Name: WALL, MARK  
Address: 514 BROAD STREET  
City-St-Zip: ROME, GA 30161 US

Title: DS  
Name: ROWLAND, CHERIE  
Address: PO BOX 1837  
City-St-Zip: TALLAHASSEE, FL 32302 US

Title: P  
Name: MATALON, ELI  
Address: 1466 LEE AVE.  
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: T  
Name: ROWLAND, BRIAN  
Address: PO BOX 1837  
City-St-Zip: TALLAHASSEE, FL 32302 US

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: BRIAN ROWLAND (TREASURER)

MR.

01/19/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date