# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 29, 2008**
**Secretary of State**

DOCUMENT# N92000000362

**Entity Name:** MARSH LANDING AT SAWGRASS HOMEOWNERS ASSOCIATION IV, INC.

**Current Principal Place of Business:**

4200 MARSH LANDING BLVD
STE 200
JACKSONVILLE BEACH, FL 32250 US

**New Principal Place of Business:**

**Current Mailing Address:**

4200 MARSH LANDING BLVD
STE 200
JACKSONVILLE BEACH, FL 32250 US

**New Mailing Address:**

**FEI Number: 59-3189060** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

MARSH LANDING MANAGEMENT CO.
4200 MARSH LANDING BLVD.
SUITE 200
JACKSONVILLE BEACH, FL 32250 US

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

LOVELAND, STEPHEN C
4200 MARSH LANDING BLVD.
SUITE 200
JACKSONVILLE BEACH, FL 32250 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: STEPHEN C. LOVELAND 04/29/2008
Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete
Name: BLIN, TIMOTHY
Address: 305 OSPREY NEST COURT
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: T ( ) Delete
Name: JOSEPH, CHARLES
Address: 132 DEER LAKE DRIVE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D ( ) Delete
Name: ROLLINGS, LAWRENCE
Address: 120 DEER COVE DRIVE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: TIMOTHY BLIN P 04/29/2008
Electronic Signature of Signing Officer or Director Date