

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000154781

FILED
Jan 08, 2008
Secretary of State

Entity Name: SAVANNAH FLOOD PROTECTION INC

Current Principal Place of Business:

937 AUGUSTA POINTE DRIVE
PALM BEACH GARDENS, FL 33418 US

New Principal Place of Business:

3567 91ST STREET N
SUITE #4
LAKE PARK, FL 33403 US

Current Mailing Address:

3567 91ST STREET NORTH
SUITE 4
LAKE PARK, FL 33403 US

New Mailing Address:

FEI Number: 59-2701135 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUDASH, DENNIS
937 AUGUSTA POINTE DRIVE
PALM BEACH GARDENS, FL 33418 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: DUDASH, BARBARA L
Address: 937 AUGUSTA POINTE DR
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: VP () Delete
Name: DUDASH, PATRICK
Address: 937 AUGUSTA POINTE DR
City-St-Zip: PALM BEACH GARDENS, FL 33418 UD

Title: D () Delete
Name: DUDASH, DENNIS
Address: 937 AUGUSTA POINTE DR
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARBARA DUDASH

PST

01/08/2008

Electronic Signature of Signing Officer or Director

_____ Date