

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010874

FILED
Feb 24, 2009
Secretary of State

Entity Name: SAANVI HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

901 NW 8TH AVE
SUITE A-6
GAINESVILLE, FL 32601

New Principal Place of Business:

901 NW 8TH AVE
SUITE A-6
GAINESVILLE, FL 32601 US

Current Mailing Address:

901 NW 8TH AVE
SUITE A-6
GAINESVILLE, FL 32601

New Mailing Address:

901 NW 8TH AVE
SUITE A-6
GAINESVILLE, FL 32601 US

FEI Number: 11-3762563

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C/O SUN LU PROPERTIES, INC.
901 NW 8TH AVE
SUITE A-6
GAINESVILLE, FL 32601 US

Name and Address of New Registered Agent:

WILSON, SALLY A
901 NW 8TH AVE
SUITE A-6
GAINESVILLE, FL 32601 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: SALLY ANN WILSON

02/24/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TAYLOR, MIKE
Address: 602 KELLSTADT ST
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: V () Delete
Name: REYNOLDS, WADE
Address: 4126 SW 15TH PL
City-St-Zip: GAINESVILLE, FL 32607

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: TAYLOR, MIKE
Address: 602 KELLSTADT ST
City-St-Zip: PORT CHARLOTTE, FL 33952 US

Title: VD (X) Change () Addition
Name: REYNOLDS, WADE
Address: 4126 SW 15TH PL
City-St-Zip: GAINESVILLE, FL 32607 US

Title: DST () Change (X) Addition
Name: LALS, LALIT
Address: 6551 NW 37TH TERRACE
City-St-Zip: GAINESVILLE, FL 32653 US

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: LALIT LALS

STD

02/24/2009

Electronic Signature of Signing Officer or Director

Date