

1.) CORPORATION NAME:

The Savannah College of Art and Design, Inc.

DUE DATE: **2/28/2011**

SCC ID NO: **F1780115**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E. AUTH IN VI CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA 23060-6802**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:
HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:
GA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 115 E YORK STREET

CITY/ST/ZIP: SAVANNAH, GA 31401-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: PAULA S WALLACE
TITLE: PRESIDENT
ADDRESS: 622 DRAYTON STREET
CITY/ST/ZIP/CO: SAVANNAH, GA 31401-

OFFICER

DIRECTOR

NAME: PAMELA RHAME
TITLE: SECRETARY
ADDRESS: 342 BULL STREET
CITY/ST/ZIP/CO: SAVANNAH, GA 31401-

OFFICER

DIRECTOR

NAME: BRIAN MURPHY
TITLE: TREASURER
ADDRESS: 622 DRAYTON STREET
CITY/ST/ZIP/CO: SAVANNAH, GA 31401-

OFFICER

DIRECTOR

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ BRIAN MURPHY

BRIAN MURPHY, TREASURER

1/5/2011

SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT

PRINTED NAME AND CORPORATE TITLE

DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.