2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an addre

SIGNATURE

FILED DOCUMENT # 718642 Apr 10, 2000 8:00 am Secretary of State 1. Entity Name SAVOY EAST ASSOCIATION, INC. 04-10-2000 90078 025 ****61.25 Principal Place of Business Mailing Address 3210 S.E. 10TH STREET 3210 S.E. 10TH STREET POMPANO BEACH FL 33062-6556 POMPANO BEACH FL 33062 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-1523410 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name - -Street Address (P.O. Box Number is Not Acceptable) KAYE & ROGER, P.A C/O ROBERT KAYE 6261 NW 6TH WAY STE 103 Zip Code City FI FT. LAUDERDALE FL 33309 8. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to **FILE NOW:** \$5.00 May Be Trust Fund Contribution. П Added to Fees Department of State FEE IS \$61.25 OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. ☐ Change Addition TITLE PD ☐ Delete TITLE uben DA SILUA MCCABE, NANCY NAME NAME 3210 SE 10 STREET STREET ADDRESS **3210 SE 10 STREET** STREET ADDRESS CITY-ST-ZIP POMPANO BEACH CITY-ST-ZIP POMPANO BEACH FL ☐ Addition ☐ Delete TITLE Change TITLE NAME DODGE, VIVIAN STREET ADDRESS STREET ADDRESS 3210 SE 10 ST CITY-ST-ZIP CITY-ST-ZIP POMPANO BEACH FL ☐ Addition ☐ Change TITLE Delete TITLE NAME BLACKWELL, RON NAME STREET ADDRESS STREET ADDRESS 3210 SE 10 STREET CITY-ST-ZIP CITY-ST-ZIP POMPANO BEACH F ☐ Addition Delete Change **VPD** TITLE TITLE NAME NAME DIFABIO, VINCENT STREET ADDRESS STREET ADDRESS 3210 SE 10TH STREET CITY-ST-ZIP CITY-ST-ZIP POMPANO BEACH FL ☐ Change ☐ Addition TITI F SDTD Delete TITLE NAME NAME PHILLIPS, JANET STREET ADDRESS STREET ADDRESS 3210 SE 10TH ST CITY-ST-ZIP CITY-ST-ZIP POMPANO BEACH F: ☐ Change ☐ Addition TITLE TITLE ☐ Delete DRUSSOS, NICK NAME NAME STREET ADDRESS STREET ADDRESS 3210 SE 10TH ST CITY-ST-7IP CITY-ST-ZIP POMPANO BEACH FL 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if

Date

Daytime Phone #