

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 24, 2001 8:00 am
Secretary of State

04-24-2001 90051 015 ****61.25

UBR3125

DOCUMENT # N05552

1. Entity Name

SAVANNA CLUB PROPERTY OWNERS' ASSOCIATION, INC.

Principal Place of Business

3492 CRABAPPLE DRIVE
PORT ST. LUCIE FL 34952
US

Mailing Address

3492 CRABAPPLE DRIVE
PORT ST. LUCIE FL 34952
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2473546

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORNETT, JANE
RIVER OAK CTR-FIRST FLOOR
401 EAST OSCEOLA STREET
STUART FL 34994

7. Name and Address of New Registered Agent

Name
BECKER & POLIAKOFF, P.A.
Street Address (P.O. Box Number is Not Acceptable)
KENNETH S. DIREKTOR
500 AUSTRALIAN AVENUE 50. 9TH FLOOR
City
WEST PALM BEACH, FL Zip Code
33401

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)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	P	☒ Delete
NAME	EMO, GEORGE	
STREET ADDRESS	3492 CRABAPPLE DR	
CITY-ST-ZIP	PORT ST. LUCIE FL 34952	
TITLE	VP	☒ Delete
NAME	HILLEN, ROBERT	
STREET ADDRESS	3492 CRABAPPLE DR	
CITY-ST-ZIP	PORT ST. LUCIE FL 34952	
TITLE	D	☐ Delete
NAME	ERLANDSON, FAYE	
STREET ADDRESS	3492 CRABAPPLE DR	
CITY-ST-ZIP	PORT ST. LUCIE FL 34952	
TITLE	D	☒ Delete
NAME	MURTHA, EMIL	
STREET ADDRESS	3492 CRABAPPLE DR	
CITY-ST-ZIP	PORT ST. LUCIE FL 34952	
TITLE	D	☒ Delete
NAME	MCCLINTOCK, TATIA	
STREET ADDRESS	3492 CRABAPPLE DR	
CITY-ST-ZIP	PORT ST. LUCIE FL 34952	
TITLE	T	☒ Delete
NAME	OSTERHOUT, WILLIAM	
STREET ADDRESS	3492 CRABAPPLE DR	
CITY-ST-ZIP	PORT ST. LUCIE FL 34952	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	☒ Change ☐ Addition
NAME	FRANKENFIELD, JOHN	
STREET ADDRESS	3492 CRABAPPLE DRIVE	
CITY-ST-ZIP	PORT ST. LUCIE, FL 34952	
TITLE	D	☒ Change ☐ Addition
NAME	JEFFREY, JOEL	
STREET ADDRESS	3492 CRABAPPLE DRIVE	
CITY-ST-ZIP	PORT ST. LUCIE, FL 34952	
TITLE	VP	☒ Change ☐ Addition
NAME	ERLANDSON, FAYE	
STREET ADDRESS	3492 CRABAPPLE DRIVE	
CITY-ST-ZIP	PORT ST. LUCIE, FL 34952	
TITLE	D	☒ Change ☐ Addition
NAME	MORGAN, DOLORES	
STREET ADDRESS	3492 CRABAPPLE DRIVE	
CITY-ST-ZIP	PORT ST. LUCIE, FL 34952	
TITLE	D	☒ Change ☐ Addition
NAME	BLATZ, ROBERT	
STREET ADDRESS	3492 CRABAPPLE DRIVE	
CITY-ST-ZIP	PORT ST. LUCIE, FL 34952	
TITLE	T	☒ Change ☐ Addition
NAME	LA ROCK, BETTYE	
STREET ADDRESS	3492 CRABAPPLE DRIVE	
CITY-ST-ZIP	PORT ST. LUCIE, FL 34952	

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

JOHN W. FRANKENFIELD PRES.
4/3/01 561-344-9286

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)