## 2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

## Apr 12, 2004 8:00 am Secretary of State DOCUMENT # N45385 1. Entity Name 04-12-2004 90275 050 \*\*\*\*61.25 SAVANNAH OAKS HOMEOWNERS ASSOCIATION. INC. Mailing Address Principal Place of Business C/O CLAY SCHERER 3395 BUCKINGHAMUCK TRAIL VERO BEACH FL 32960 C/O CLAY SCHERER 3395 BUCKINGHAMUCK TRAIL VERO BEACH FL 32960 3. Mailing Address 2. Principal Place of Business ONANCY CURTIS Curtis O NANCY Suite, Apt. #, etc. 3410 BUCKINGHAMMOCK Suite, Apt #, etc. 10 BuckINGHAMMOCK Tri CR2E037 (11/03) 3410 City & State BEACH Applied For City & State 4. FEI Number 65-0325627 BEACH Not Applicable VERO Country \$8.75 Additional Country 5. Certificate of Status Desired 32960 Fee Required 32960 us A 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ONALD 12-C SCHERER, CLAY (P.O. Box Number is Not Acceptable) 3445 BUCKINGHAMMOCK TRL BUCKINGHAMMOC VERO BEACH FL 32960 32960 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Florida Department of State Trust Fund Contribution. Added to Fees Due By May 1, 2004 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Change **X** Addition Delete TITLE -DON HYER TITLE 3400 BUCKINGHAMMOCK TRALL SCHERER, CLAY NAME NAME 3395 BUCKINGHAMMOCK TRL STREET ADDRESS STREET ADDRESS VERO BEAGH, FL. VERO BEACH FL 32960 CITY-ST-ZIP CITY-ST-ZIP Change **★** Addition Delete TITLE TITLE CURTIS BILL HICKEY, JULES 3410 BUCKINGHAMMOCK TRAIL NAME 3395 BUCKINGHAMMOCK TRL STREET ADDRESS STREET ADDRESS BEACH FL 32960 VERO BEACH FL 32960 CITY-ST-ZIP CITY-ST-ZIP - Change - - Addition ☐ Delete ~ CURTIS, NANCY NAME 3410 BUCKINGHAMMOCK-TRL. STREET ADDRESS STREET ADDRESS VERO BEACH FL 32960 CITY-ST-ZIP CITY - ST - ZIP ☐ Addition ☐ Change ☐ Delete TITLE SCHLITT, J. THOMAS NAME 1850 COBIA DRIVE STREET ADDRESS STREET ADDRESS VERO BEACH FL 32960 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE SCHLITT, MARY NAME NAME 3420 BUCKINGHAMMOCK TR STREET ADDRESS STREET ADDRESS VERO BEACH FL 32960 CITY-ST-ZIP City-ST-7IP ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby 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

FILED

Y ancy Cuttie - NANCY Cut SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 772-978:0956

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