

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000004416

1. Entity Name

SAVANNAH GLEN HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

1730 KINGSLEY AVE. SUITE E
ORANGE PARK FL 32073

Mailing Address

1730 KINGSLEY AVE. SUITE E
ORANGE PARK FL 32073-7868

2. Principal Place of Business

920 3rd Street

Suite, Apt. #, etc.

Suite B

City & State

Neptune Beach, FL

3. Mailing Address

920 3rd Street

Suite, Apt. #, etc.

Suite B

City & State

Neptune Beach, FL

Zip

32266

Country

USA

Zip

32266

Country

USA

4. FEI Number

59-3462302

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WOOD, JAMES R

1730 KINGSLEY AVE, SUITE E

ORANGE PARK FL 32073

7. Name and Address of New Registered Agent

Name

Wallace, Denise

Street Address (P.O. Box Number is Not Acceptable)

920 3rd Street

Suite B

City

Neptune Beach

FL

Zip Code

32266

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]
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/17/00

FILE NOW:
FEES 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 NAME STREET ADDRESS CITY-ST-ZIP	D P WOOD, JAMES R 1730 KINGSLEY AVE, SUITE E ORANGE PARK FL 32073	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VP WOOD, JAMES R 1730 KINGSLEY AVE, SUITE E ORANGE PARK FL 32073	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D T/S WALLACE, PATRICK R 1730 KINGSLEY AVE, SUITE E ORANGE PARK FL 32073	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 4729 Highway 17 South, #204 Orange Park, FL 32073
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 4729 Highway 17 South #204 Orange Park, FL 32073
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 4729 Highway 17 South, #204 Orange Park, FL 32073
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Mar 23, 2000 8:00 am
Secretary of State

03-23-2000 90014 028 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/99)