

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 11, 2008 08:00 A
Secretary of State

DOCUMENT # N96000002675

1. Entity Name

SAVANNA HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business

C/O INTEGRATED PROPERTY MGMT
3435-10TH STREET N, #201
NAPLES, FL 34103

Mailing Address

IPM
3435 10TH ST, N, SUITE 201
NAPLES, FL 34103 US



04012008 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0698956

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SAMOUCE, ROBERT C
3405 PARK CENTRAL COBORT
NAPLES, FL 34105

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IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reissuing)

DATE

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	FORNESS, KINGSLEY
STREET ADDRESS	1754 MARSH RUN
CITY-ST-ZIP	NAPLES, FL
TITLE	DVP
NAME	JENNINGS, PATRICIA
STREET ADDRESS	1730 MARSH RUN
CITY-ST-ZIP	NAPLES, FL 34109
TITLE	STD
NAME	NOONE, DENNIS JR
STREET ADDRESS	1774 MARSH RUN
CITY-ST-ZIP	NAPLES, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/23/08-80074-001 61.25

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Kingsley D. Forness / **KINGSLEY D. FORNESS**

4/7/08 **651-283-5222**
Date Daytime Phone #