

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000101086

**FILED
Mar 18, 2020
Secretary of State
0848175349CC**

Entity Name: SAVILLS OCCUPIER SERVICES INC.

Current Principal Place of Business:

3000 BAYPORT DRIVE #485
TAMPA, FL 33607

Current Mailing Address:

3000 BAYPORT DRIVE #485
TAMPA, FL 33607 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.
801 US HWY 1
NORTH PALM BEACH , FL 33408 US

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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name TOWNE, L. STANTON
Address 3000 BAYPORT DRIVE #485
City-State-Zip: TAMPA FL 33607

Title DIRECTOR, CEO
Name STEIR, MITCHELL
Address 3000 BAYPORT DRIVE #485
City-State-Zip: TAMPA FL 33607

Title PRESIDENT, DIRECTOR
Name RUDIN, MITCHELL
Address 3000 BAYPORT DRIVE #485
City-State-Zip: TAMPA FL 33607

Title TREASURER
Name PRAGER, GERALD
Address 3000 BAYPORT DRIVE #485
City-State-Zip: TAMPA FL 33607

Title EXECUTIVE VICE PRESIDENT,
DIRECTOR
Name MORGAN, MATTHEW
Address 3000 BAYPORT DRIVE #485
City-State-Zip: TAMPA FL 33607

Title EXECUTIVE VICE PRESIDENT
Name DUNCAN, ANN
Address 3000 BAYPORT DRIVE #485
City-State-Zip: TAMPA FL 33607

Title DIRECTOR
Name RIDLEY, MARK
Address 3000 BAYPORT DRIVE #485
City-State-Zip: TAMPA FL 33607

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: L. STANTON TOWNE

**SECRETARY, CARRIONE 03/18/2020
BERKELEY ATTORNEY-
IN-FACT**

Electronic Signature of Signing Officer/Director Detail

Date