

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 22 AM 11:06

DOCUMENT # 761950 (5)

1. Corporation Name

HIGH POINT ON THE SAVANNAHS CONDOMINIUM ASSOCIATION SECTION 2, INC.

Principal Place of Business

Mailing Address

SOCIATION SECTION 2, INC.
170 WEST ROYAL TERN LANE
FT PIERCE FL 34902

SOCIATION SECTION 2, INC.
170 WEST ROYAL TERN LANE
FT PIERCE FL 34902

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/12/1982

3a. Date of Last Report

01/31/1994

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐ \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 1175 N.E. 125th Street

25 1175 N.E. 125th Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 102

27 Suite 102

City & State

City & State

23 North Miami, FL

28 North Miami, FL

Zip

Country

Zip

Country

24 33161

25 USA

29 33161

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TATE, J. KENNETH
1175 N.E. 125TH ST., SUITE 102
NORTH MIAMI FL 33161

81 Name

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

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors, I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE STD
NAME TATE, J. KENNETH
STREET ADDRESS 1175 N.E. 125TH ST #102
CITY - ST - ZIP NORTH MIAMI FL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE VD
NAME TATE, JAMES D.
STREET ADDRESS 1175 N.E. 125TH ST #102
CITY - ST - ZIP NORTH MIAMI FL

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE PD
NAME TATE, STANLEY G
STREET ADDRESS 1175 N.E. 125TH ST #102
CITY - ST - ZIP NORTH MIAMI FL

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/15/95

305-891-1106

Date

Telephone Number