

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 28, 2003 8:00 am
Secretary of State

01-28-2003 90069 035 ***150.00

DOCUMENT # K09525

1. Entity Name
SAVANNAH INDUSTRIAL PARK, INC.



Principal Place of Business
1601 NE BRAILLE PLACE
JENSEN BEACH FL 34957
US

Mailing Address
1601 NE BRAILLE PLACE
JENSEN BEACH FL 34957
US



2. Principal Place of Business

3. Mailing Address

1559-S.W. 6th Ct.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
BOCA RATON, FL.

4. FEI Number **65-0021434**

Applied For

Not Applicable

Zip

Country

Zip
33486

Country

PALM BEACH

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PORTER, JACK
C/O FOLEY & GARDNER - SUITE 202
PHILLIPS PT EAST TOWER 777 S FLAGLER DR
WEST PALM BEACH FL 33401

Name

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

City

FL

Zip Code

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 reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PDS** ☒ Delete
NAME **THOMAS, WILLIAM A JR**
STREET ADDRESS **1513 HILLSIDE DR**
CITY-ST-ZIP **FORT COLLINS CO 80524**

TITLE **PRESIDENT + DIRECTOR** ☒ Change ☐ Addition
NAME **JAMES P. KAFFLEN**
STREET ADDRESS **1559-S.W. 6th Ct**
CITY-ST-ZIP **BOCA RATON, FL 33486**

TITLE **VTD** ☒ Delete
NAME **NEWBERY, DANIEL J**
STREET ADDRESS **901 MAIN ST 12TH FLOOR**
CITY-ST-ZIP **DALLAS TX 75202-3714**

TITLE **DIRECTOR + TREASURER** ☒ Change ☐ Addition
NAME **JAMES H. ELAM**
STREET ADDRESS **SUNTRUST BLDG. - SUITE 300 111 ORANGE AVE.**
CITY-ST-ZIP **FORT PIERCE, FL 34950**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SECRETARY** ☒ Change ☐ Addition
NAME **MARILYN A. MOORE**
STREET ADDRESS **777-SOUTH FLAGLER DR**
CITY-ST-ZIP **WEST PALM BEACH, FL 33401-6195**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **BOARD VP** ☒ Change ☐ Addition
NAME **C. DENNIS BLANZ**
STREET ADDRESS **1041-S.W. 17th ST**
CITY-ST-ZIP **BOCA RATON FL 33432**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **DIRECTOR - VP** ☒ Change ☐ Addition
NAME **TED ASCHARCH**
STREET ADDRESS **900-SOUTH FOR. HWY - 4th F**
CITY-ST-ZIP **STUART, FL 34994**

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 607, 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

1/22/03
Date

(561) 368-4412
Daytime Phone #

CR2E034 (10/02)