## ND0498

Office Use Only



900209523899

AN 13 18 18

07/05/11--01046--012 \*\*35.00

11 JUL -5 PM 2: 58

ROCK

## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT:	The Savannas Club	Association, Inc.	
DOCUMENT NUM	Nonzoo		
	ent of Change of Registered Off	ice/Agent and fee are submi	tted for filing.
	spondence concerning this mate	•	To ming.
*******	Elizabeth B Name of C	onan, Esquire ontact Person	
Ross Earle & Bonan, P.A. Firm/Company			
789 S Federal Highway, Suite 101 Address			
Stuart, FL 34994 City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information	on concerning this matter, please	e call:	
	zabeth Bonan	at ( 772 ) Area Code & Dayti	287-1745
Name	of Contact Person	Area Code & Dayti	me Telephone Number
Enclosed is a \$35,00 c	check made payable to the Depa	artment of State.	
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment So Division of Co Clifton Buildi 2661 Executiv Tallahassee, F	ection orporations ng re Center Circle

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: The Savannas Club Association, Inc.
2. The principal office address: 543 NW Lake Whitney Place, Suite 101-102
Port St. Lucie, FL 34986
3. The mailing address (if different): same as above
4. Date of incorporation/qualification: 12/21/1983 Document number: N00498
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Bonan, Elizabeth
759 S Federal Highway, Suite 212
Stuart, FL 34994
759 S Federal Highway, Suite 212  Stuart, FL 34994  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Ross Earle & Bonan, P.A.
Ross Earle & Bonan, P.A.
789 S Federal Highway, Suite 101 P.O. Box NOT acceptable
Stuart, FL 34994
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Signature of an officer of director RAPES RES
I hereby accept the appointment as registered agent and agree to act in this capacity.  I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Sunt an 6/28/11
Signature of Registered Agent Date
If signing on behalf of an entity:
ELIZABETH BONAN, ESQ.  Typed or Printed Name

\* \* \* FILING FEE: \$35.00 \* \* \*