

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000008436

FILED  
Feb 20, 2012  
Secretary of State

**Entity Name:** SAVE EAST WILTON MANORS, INC.

**Current Principal Place of Business:**

2450 NE 15TH AVENUE  
#210  
WILTON MANORS, FL 33305

**New Principal Place of Business:**

**Current Mailing Address:**

2450 NE 15TH AVENUE  
#210  
WILTON MANORS, FL 33305

**New Mailing Address:**

**FEI Number:** 27-3407974      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TIGHE, THOMAS J  
800 EAST BROWARD BLVD.  
SUITE 710  
FORT LAUDERDALE, FL 33301 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: FIORE, JOHN  
Address: 2450 NE 15TH AVENUE, #210  
City-St-Zip: WILTON MANORS, FL 33305

Title: D  
Name: NIXON, MARTIN  
Address: 2307 NE 15TH TERRACE  
City-St-Zip: WILTON MANORS, FL 33305

Title: D  
Name: NIXON, LAURA  
Address: 2307 NE 15TH TERRACE  
City-St-Zip: WILTON MANORS, FL 33305

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOHN FIORE

PD

02/20/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date