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
1995 MAR 20 PM 12:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N29269 (0)

1. Corporation Name
SAVANNAS RESERVE ENDOWMENT, INC.

Principal Place of Business	Mailing Address
905 SHOREWINDS DR FT.PIERCE FL 34958	P.O. BOX 2673 JENSEN BCH FL 34958

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/14/1988
3a. Date of Last Report: 03/15/1994
4. FEI Number: 65-0124775 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 9551 GUMBO LIMBO LANE	26 9551 GUMBO LIMBO LANE
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: JENSEN BEACH, FL	28 City & State: JENSEN BEACH, FL
24 Zip: 34957 25 Country: U.S.A.	29 Zip: 34957 30 Country: U.S.A.

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 X $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes X No

9. Name and Address of Current Registered Agent

SMALL, MICHAEL
10213 S. INDIAN RIVER DRIVE
FT. PIERCE FL 34982

10. Name and Address of New Registered Agent

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D/T ☐ Change ☒ Addition
NAME	GUHSE, RICK C	1.2 NAME	PRZEKOP, LAURA
STREET ADDRESS	2013 C OLEANDER BLVD	1.3 STREET ADDRESS	7604 BROOKLINE AVE
CITY-ST-ZIP	FT.PIERCE FL 34950	1.4 CITY-ST-ZIP	FT PIERCE FL 34951
TITLE	D	2.1 TITLE	D/P ☒ Change ☐ Addition
NAME	PAZARA, PAT	2.2 NAME	PAZARA, PAT
STREET ADDRESS	5901 CASSIA DRIVE	2.3 STREET ADDRESS	5901 CASSIA DRIVE
CITY-ST-ZIP	FT. PIERCE FL	2.4 CITY-ST-ZIP	FT PIERCE FL 34982
TITLE	D	3.1 TITLE	D/V ☒ Change ☐ Addition
NAME	SMALL, MICHAEL	3.2 NAME	SMALL, MICHAEL
STREET ADDRESS	10213 S. INDIAN RIVE DR	3.3 STREET ADDRESS	10213 S. INDIAN RIVER DR.
CITY-ST-ZIP	FT. PIERCE FL	3.4 CITY-ST-ZIP	FT PIERCE FL 34982
TITLE	D	4.1 TITLE	D/S ☒ Change ☐ Addition
NAME	SMALL, JANET	4.2 NAME	SMALL, JANET
STREET ADDRESS	10213 S. INDIAN RIVER DR.	4.3 STREET ADDRESS	10213 S INDIAN RIVER DR.
CITY-ST-ZIP	FT. PIERCE FL 34982	4.4 CITY-ST-ZIP	FT PIERCE FL 34982
TITLE		5.1 TITLE	D ☐ Change ☒ Addition
NAME		5.2 NAME	HERZOG, JOE
STREET ADDRESS		5.3 STREET ADDRESS	9416 GUMBO LIMBO LANE
CITY-ST-ZIP		5.4 CITY-ST-ZIP	JENSEN BEACH FL 34957
TITLE		6.1 TITLE	D ☐ Change ☒ Addition
NAME		6.2 NAME	COFFMAN, CHARLES
STREET ADDRESS		6.3 STREET ADDRESS	2101 HARLOW ST SE
CITY-ST-ZIP		6.4 CITY-ST-ZIP	PORT ST LUCIE FL 34952

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)(i), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Pat Pazara PAT PAZARA 3-7-95 407-465-8712
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0070071

FLM W/ N29269

KAR6D

Department of Environmental Protection

Lawton Chiles
Governor

Marjory Stoneman Douglas Building
3900 Commonwealth Boulevard
Tallahassee, Florida 32399-3000

Virginia B. Wetherell
Secretary

March 16, 1995

Mr. David Mann, Director
Division of Corporations
Department of State
Post Office Box 6327
Tallahassee, Florida 32314

Dear Mr. Mann:

This letter is to certify to you that the Friends of Savannas Reserve Endowment, Inc. is a duly authorized citizen support organization which is under contract to provide support for the Division of Recreation and Parks in accordance with Section 258.015, F.S.

Sincerely,

Fran P. Mainella

Fran P. Mainella, CLP
Director
Division of Recreation and Parks

FPM/pwc

RECEIVED
95 MAR 20 AM 9:40
DIRECTOR
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA