

FILE NOW: FILING FEE IS \$61.25

APPROVED
AND
FILED

pg 1082

98 MAR 30 AM 10:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # **N29269** (0)

1. Corporation Name

SAVANNAS RESERVE ENDOWMENT, INC.

Principal Place of Business

**9551 GUMBO LIMBO LANE
JENSEN BEACH FL 34957**

Mailing Address

**9551 GUMBO LIMBO LANE
JENSEN BEACH FL 34957**

3. Date Incorporated or Qualified

11/14/1988

4. FEI Number

65-0124775

Applied For

Not Applicable

5. Certificate of Status Desired ☐ Yes ☒ No

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐ Yes ☒ No

**\$5.00 May Be
Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**COFFMAN, CHARLES
2101 HARLOW ST S.E.
PORT ST LUCIE FL 34952**

81 Name

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

5901 Cassia Dr.

83

84 City

Ft. Pierce

FL

85 Zip Code

34982

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Pat Pazara **PAT PAZARA**

Mardi 5, 1998

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **DT** ☐ DELETE

NAME **PRZEKOP, LAURA**
STREET ADDRESS **7804 BROOKLINE AVE.**
CITY-ST-ZIP **FT. PIERCE FL 34951**

TITLE **DP** ☐ DELETE

NAME **PAZARA, PAT**
STREET ADDRESS **5901 CASSIA DRIVE**
CITY-ST-ZIP **FT. PIERCE FL**

TITLE **DV** ☐ DELETE

NAME **COFFMAN, CHARLES**
STREET ADDRESS **2101 HARLOW ST S.E.**
CITY-ST-ZIP **PORT ST LUCIE FL 34952**

TITLE **DS** ☐ DELETE

NAME **SMALL, JANET**
STREET ADDRESS **10213 S. INDIAN RIVER DR.**
CITY-ST-ZIP **FT. PIERCE FL 34982**

TITLE **D** ☐ DELETE

NAME **HERZOG, JOE**
STREET ADDRESS **9416 GUMBO LIMBO LANE**
CITY-ST-ZIP **JENSEN BEACH FL 34952**

TITLE **D** ☐ DELETE

NAME **BRANDT, HILLARY T**
STREET ADDRESS **1176 OCEANVIEW CIR**
CITY-ST-ZIP **JENSEN BEACH FL 34957**

13. *ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **DT** ☒ Change ☐ Addition

1.2 NAME **Pazara, Pat**
1.3 STREET ADDRESS **5901 Cassia Dr.**
1.4 CITY-ST-ZIP **Ft. Pierce, FL 34982**

2.1 TITLE **C** ☒ Change ☐ Addition

2.2 NAME **Herzog, Joe**
2.3 STREET ADDRESS **9416 Gumbo Limbo Lane**
2.4 CITY-ST-ZIP **Jensen Beach, FL 34957**

3.1 TITLE **MD** ☒ Change ☐ Addition

3.2 NAME **Robert Regutti**
3.3 STREET ADDRESS **110 Riverside Dr.**
3.4 CITY-ST-ZIP **Jensen Beach, FL 34957**

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE **D** ☒ Change ☐ Addition

5.2 NAME **Charles Coffman**
5.3 STREET ADDRESS **2101 Harlow St S.E.**
5.4 CITY-ST-ZIP **Port St Lucie FL 34952**

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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:

Joseph W. Herzog **JOSEPH W. HERZOG**

3-10-98

CR2E037 (10/97)



Department of Environmental Protection

N29269 pg 2 of 2

Lawton Chiles
Governor

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

Virginia B. Wetherell
Secretary

March 25, 1998

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

Dear Mr. Mann:

This letter is to certify to you that 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, CLP
Director
Division of Recreation and Parks

FPM/paw
Attachments