

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2007 8:00 am
Secretary of State

03-05-2007 90046 015 ****70.00

DOCUMENT # N94000000272 1. Entity Name SAVONA HOMEOWNER'S ASSOCIATION, INC.					
Principal Place of Business 3714 SE 21ST AVE CAPE CORAL, FL 33904 US			Mailing Address 3714 SE 21ST AVE CAPE CORAL, FL 33904 US		
2. Principal Place of Business - No P.O. Box # 1902 SE 40TH ST Suite, Apt. #, etc. CAPE CORAL, FL City & State		3. Mailing Address 1902 SE 40TH ST Suite, Apt. #, etc. CAPE CORAL, FL City & State			
Zip 33904		Country LEE		4. FEI Number 65-0461455	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required		Applied For ☐ Not Applicable			
6. Name and Address of Current Registered Agent MORRISON, SCOTT R 3714 SE 21ST AVE CAPE CORAL, FL 33904			7. Name and Address of New Registered Agent Name JUDY L. RAMAGE Street Address (P.O. Box Number is Not Acceptable) 1902 SE 40TH ST City CAPE CORAL FL Zip Code 33904		
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 JUDY L. RAMAGE, PRESIDENT <i>Judy Ramage</i> 2/26/07 Signature, typewritten printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when terminating)					
Filing Fee is \$81.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MP YOUNG, DAVID 1902 SAVONA PKWY CAPE CORAL, FL 33904	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V-FRED WAGNER 1824 SE 36TH TERR. CAPE CORAL, FL 33904	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR MORRISON, LYNN 3714 SE 21ST AVE CAPE CORAL, FL 33904	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T-MAYRE E. VEITE 3910 SE 20TH AVE CAPE CORAL, FL 33904	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PROSSER, JOAN 2118 SE 96TH TERRACE CAPE CORAL, FL 33904	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 617, 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: <i>Judy Ramage</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			2/26/07 Date		