## **FILED** Apr 18, 2000 8:00 am Secretary of State

04-18-2000 90215 006 \*\*\*150.00

## , 2000 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # P24371**

1. Entity Name

RF\	/FRI	Υ	SAVANA	CAY	MANOR.	INC.
				Vni	ITO UTO III	1110

BEVERLY SAVANA CAY MANOR, INC.									
Principal Place of Business	Mailing Address 5111 ROGERS AVENUE SUITE 40-A FORT SMITH AR 72919-9007 US								
ROGERS AVENUE SUITE 40-A TOTAL SMITH AR 72919-0155 US									
2. Principal Place of Business One Thousand Beverly Way	3. Mailing Address One Thousand Beverly Way								



Suite, Apt.	#, etc.	Suite, Ap	η, <del>π</del> , <del>ο</del> ιο.			DO NOT WATE IN T	IID GFACE		
City & State		City & Sta	City & State			4. FEI Number 05-4047204		plied For	
•	Smith, AR	1 .	Fort Smith AR			95-4217381	<del></del>	t Applicable	
Zip	Country	Zip		Country	<b>.</b>	Certificate of Status Desired	\$8.75 Add	itional	
72919	USA	72	919	USA	3. (	Dertificate of Status Desired	Fee Require		
	6. Name and Address of Curr	ent Registered Ag	ent	7. Name and Address of New Registered Agent					
				Name					
COR	PORATION SERVICE COMPAN	ΙΥ		Street Address (P.O. Box Number is Not Acceptable)					
1201	HAYS STREET								
TALL	AHASSEE FL 32301-2525								
				Cit. Tip Code					
				City FL Zip Code					
8. The above	named entity submits this stateme	nt for the purpose of	of changing its reg	gistered office or	registered age	ent, or both, in the State of Florida.			
	,	. ,-		_	•				
SIGNATURE _									
SIGNATURE _	Signature, typed or printed name of registered a	gent and title if applicable	(NOTE: Re	egistered Agent signatu	re required when re	instating) DA	πE		
O This serve	vention in aligible to entire, its lates	riblo	EILE NOW!!!	FFE IS \$150.0	<u> </u>				
•	oration is eligible to satisfy its Intang equirement and elects to do so.		FILE NOW!!! FEE IS \$150. After MAY 1, 2000 Fee will be \$150.			10. Election Campaign Financing		May Be	
_		<b>-</b> ,	Check Payable			Trust Fund Contribution.	☐ Added	to Fees	
11.	OFFICERS A	ND DIRECTORS		12.	AD	DITIONS/CHANGES TO OFFICERS	AND DIRECTORS	S IN 11	
TITLE	DC		☐ Delete	TITLE			- Change	Addition	
NAME	BANKS, DAVID R		_ Delete	NAME			<b>A</b>	_	
STREET ADDRESS	5111 ROGERS AVENUE, SUI	TE 40-A		STREET ADDRESS	One Ti	housand Beverly Way		1	
CITY-ST-ZIP	FT. SMITH AR			CITY-ST-ZIP		Smith, AR 72919			
TITLE	DP		☐ Delete	TITLE			Change	Addition	
NAME	MATHIES, WILLIAM A.			NAME					
STREET ADDRESS	5111 ROGERS AVENUE SU	ITE 40-A		STREET ADDRESS	One Thousand Beverly Way				
CITY-ST-ZIP	FORT SMITH AR 72919-0155			CITY-ST-ZIP	Fort Smith, AR 72919				
TITLE	DV		☐ Delete	TITLE			🔁 Change	☐ Addition	
NAME	STEPHENS, BOBBY			NAME					
STREET ADDRESS	5111 ROGERS AVENUE, SUI	TE 40-A		STREET ADDRESS CITY-ST-ZIP		housand Beverly Way			
CITY-ST-ZIP	ST-ZIP FT. SMITH AR				Fort	Smith, AR 72919			
THTLE	VPAS		☐ Delete	TITLE			X Change	☐ Addition	
NAME	MACKENZIE, JOHN W.			NAME					
STREET ADDRESS	5111 ROGERS AVENUE SU			STREET ADDRESS		housand Beverly Way			
CITY-ST-ZIP	FORT SMITH AR 72919-0155			CITY-ST-ZIP		SMith, AR 72919			
TITLE	DVC	3	xx Delete	TITLE	EVP, C		Change	Addition	
NAME	HENDRICKSON, BOYD	TE 40 A		NAME STREET ADORESS		n, Scott			
STREET ADDRESS CITY-ST-ZIP	5111 ROGERS AVENNE, SUI	IE 4U-A		STREET ADDRESS CITY-ST-ZIP		ousand Beverly Way		1	
	FT. SMITH AR				-	mith, AR 72919	Chases	Addition	
TITLE	S DOMMEDWILE BOREDT W		🖈 Delete	TITLE Namé	EVP		☐ Change	***Addition	
NAME STREET ADDRESS	POMMERVILLE, ROBERT W	TE 40-A		STREET ADDRESS	Moore,	T. Jerald			
CITY-ST-ZIP	5111 ROGERS AVENUE, SUI	1C 40*A		CITY-ST-ZIP		ousand Beverly Way			
OH 1-31-71F	FT. SMITH AR			3(1) 3[-ZII	Fort Si	mith,AR 72919			

13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** 

John W. MacKenzie Vice President, Deputy, /3/2000

501-201-2000

General Counsel and Tasistant Secretary

Daytime Phone #

CR2E034 (9/99)