## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT # P95000015040

1. Entity Name

SAVANNAH LAND CORPORATION



Principal Place of Business

usiness

450 EAST LAS OLAS BLVD. SUITE 1500

FORT LAUDERDALE, FL 33301

Mailing Address

450 EAST LAS OLAS BLVD.

SUITE 1500

FORT LAUDERDALE, FL 33301

### FILED Apr 26, 2007 8:00 am Secretary of State

04-26-2007 90230 016 \*\*\*150.00

40084511



DATE

01102007

No Chg-P

CR2E034 (11/05)

4.	FEI Number
	65-0581054

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6.	Name and	Address	of Current	Registered	Agent

DO NOT WRITE IN THIS SPACE

AMERICAN INFORMATION SERVICES, INC ONE SE THIRD AVE

27TH FL

MIAMI, FL 33131

## DO NOT WRITE IN THIS SPACE

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.	

(NOTE: Registered Agent signature required when reinstating)

SIGNATURE

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

\_\_\_\_\_

\$5.00 May Be Added to Fees

#### FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00

Election Campaign Financing Trust Fund Contribution.

OFFICERS AND DIRECTORS 10. TITLE PD HUIZENGA, JR., H. WAYNE NAME 450 EAST LAS OLAS BLVD., STE. 1500 STREET ADDRESS FORT LAUDERDALE, FL 33301 CITY-ST-7IP **VPAS** TITLE HENNINGER, ROBERT J 450 EAST LAS OLAS BLVD., STE, 1500 STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE, FL 33301 TITLE BRANDEN, CRIS V NAME STREET ADDRESS 450 EAST LAS OLAS BLVD., 15 FLOOR CITY-ST-ZIP FORT LAUDERDALE, FL 33301 TITLE NAME STREET ADDRESS CITY-ST-ZIP

# DO NOT WRITE IN THIS SPACE

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 flustee empowered to execute this report as required by Chapter 607, 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Cris V. Branden

41 10101

Daytime Phone #