

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745871

FILED  
Jul 23, 2008  
Secretary of State

Entity Name: SPRING LAKE COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

SPRINGLAKE COMMUNITY ASSOCIATION, INC  
3150 SHOREWOOD LN STE 100  
FORT MYERS, FL 33907 US

**New Principal Place of Business:**

**Current Mailing Address:**

SPRINGLAKE COMMUNITY ASSOCIATION, INC  
3150 SHOREWOOD LN STE 100  
FORT MYERS, FL 33907 US

**New Mailing Address:**

FEI Number: 65-0072343      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

WALL, CHRISTIE L  
3150 SHOREWOOD LANE  
STE 100  
FORT MYERS, FL 33907 US

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: WALL, CHRISTIE L  
Address: 3130-B1 SHOREWOOD LANE  
City-St-Zip: FORT MYERS, FL 33907

Title: V ( ) Delete  
Name: SEYER, DAMON  
Address: 3130-B4 SHOREWOOD LANE  
City-St-Zip: FORT MYERS, FL 33907

Title: ST ( ) Delete  
Name: EVANS, SHARI  
Address: 3130-B3 SHOREWOOD LANE  
City-St-Zip: FORT MYERS, FL 33907

Title: D ( ) Delete  
Name: CHRISTY, JANET  
Address: 6272 F3 WESTSHORE DRIVE  
City-St-Zip: FORT MYERS, FL 33907

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: EVANS, SHARI  
Address: 3130-B3 SHOREWOOD LANE  
City-St-Zip: FORT MYERS, FL 33907

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ST (X) Change ( ) Addition  
Name: HANLEY, JAMES  
Address: 3136-A4 SHOREWOOD LANE  
City-St-Zip: FORT MYERS, FL 33907

Title: D (X) Change ( ) Addition  
Name: SECREST, ADRIAN  
Address: 6268-E4 WESTSHORE DRIVE  
City-St-Zip: FT. MYERS, FL 33907

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTIE L. WALL

RA

07/23/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date