## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000037435

Entity Name: SPRUCE CREEK MAINTENANCE INC

FILED Apr 22, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

2060 COUNTRY FARMS ROAD 2060 COUNTRY FARMS ROAD DAYTONA BEACH, FL 32124 PORT ORANGE, FL 32128 LIS

**Current Mailing Address: New Mailing Address:** 

2060 COUNTRY FARMS ROAD 2060 COUNTRY FARMS ROAD DAYTONA BEACH, FL 32124 US PORT ORANGE, FL 32128 US

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

JOHNSON, DON E JOHNSON, DON E 2060 COUNTRY FARMS ROAD 2060 COUŃTRY FARMS ROAD DAYTONA BEACH, FL 32124 US PORT ORANGE, FL 32128

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: 04/22/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition JOHNSON, DON E JOHNSON, DON E Name: Name:

2060 COUNTRY FARMS ROAD 2060 COUNTRY FARMS ROAD Address: Address: City-St-Zip: DAYTONA BEACH, FL 32124 US City-St-Zip: PORT ORANGE, FL 32128 US

Title: VP,T Title: (X) Change ( ) Addition () Delete JOHNSON, KATHY M Name: Name: JOHNSON, KATHY M

2060 COUNTRY FARMS ROAD 2060 COUNTRY FARMS ROAD Address: Address: DAYTONA BEACH, FL 32124 US PORT ORANGE, FL 32128 US City-St-Zip: City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DON E JOHNSON PS 04/22/2008