2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2004
Secretary of State

DOCUMENT# N98000005575

Entity Name: COUNTRY CROSSINGS AT SPRING RIDGE PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR. 434, #5000
LONGWOOD, FL 327795044

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR. 434, #5000
LONGWOOD, FL 327795044

New Mailing Address:

FEI Number: 59-3612584 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HART, JAMES W JR.
SENTRY MANAGEMENT INC
2180 W. SR 434, STE. 5000
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

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: D ( ) Delete
Name: FRAISER, CLARENCE F
Address: 1548 LANCASTER TERR
City-St-Zip: JACKSONVILLE, FL 32204

Title: D ( ) Delete
Name: GRINDSTAFF, MICKEY
Address: 1548 LANCASTER TERR
City-St-Zip: JACKSONVILLE, FL 32204

Title: D ( ) Delete
Name: SUTER, MAX
Address: 1548 LANCASTER TERR
City-St-Zip: JACKSONVILLE, FL 32204

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: MARBURGER, BILL
Address: 818 KAMCHATKA CT
City-St-Zip: APOPKA, FL 32712

Title: VPD (X) Change ( ) Addition
Name: PEARSON, JAMES
Address: 802 GRAND SAYAN LOOP
City-St-Zip: APOPKA, FL 32712

Title: TD (X) Change ( ) Addition
Name: PARKER, SCOTT
Address: 2252 PELINION ST
City-St-Zip: APOPKA, FL 32712

Title: D ( ) Change (X) Addition
Name: ODOWD, STEPHEN
Address: 605 E ROBINSON ST STE 750
City-St-Zip: ORLANDO, FL 32801

Title: D ( ) Change (X) Addition
Name: SCHILLING, LISA
Address: 2425 CERBERUS DR
City-St-Zip: APOPKA, FL 32712

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BILL MARBURGER PD 03/23/2004

Electronic Signature of Signing Officer or Director — Date