

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 730672

**Entity Name:** SPRUCE CREEK PROPERTY OWNER'S ASSOCIATION, INC.

**FILED**  
**Feb 15, 2017**  
**Secretary of State**  
**CC7060892206**

**Current Principal Place of Business:**

212-1 CESSNA BLVD  
PORT ORANGE, FL 32128

**Current Mailing Address:**

212-1 CESSNA BLVD  
PORT ORANGE, FL 32128 US

**FEI Number: 23-7422285**

**Certificate of Status Desired: No**

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

JOHNSON, ROSELLE T  
212-1 CESSNA BLVD.  
PORT ORANGE, FL 32128 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: ROSELLE T. JOHNSON**

**02/15/2017**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           DIRECTOR, PRESIDENT  
Name           BREVARD, PAUL  
Address        212-1 CESSNA BLVD  
City-State-Zip: PORT ORANGE FL 32128

Title           DIRECTOR, VP  
Name           KELLY, MICHAEL  
Address        212-1 CESSNA BLVD  
City-State-Zip: PORT ORANGE FL 32128

Title           DIRECTOR, TREASURER  
Name           POWELL, DENNIS  
Address        212-1 CESSNA BLVD  
City-State-Zip: PORT ORANGE FL 32128

Title           DIRECTOR, SECRETARY  
Name           MURRAY, JOHN D.  
Address        212-1 CESSNA BLVD  
City-State-Zip: PORT ORANGE FL 32128

Title           DIRECTOR  
Name           CALHOUN, JIMMY  
Address        212-1 CESSNA BLVD  
City-State-Zip: PORT ORANGE FL 32128

Title           DIRECTOR  
Name           MOORE, DIANNE  
Address        212-1 CESSNA BLVD  
City-State-Zip: PORT ORANGE FL 32128

Title           DIRECTOR  
Name           EDWARDS, JEFFREY L.  
Address        212-1 CESSNA BLVD  
City-State-Zip: PORT ORANGE FL 32128

*I hereby 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 all other like empowered.*

**SIGNATURE: PAUL BREVARD**

**PRESIDENT**

**02/15/2017**

Electronic Signature of Signing Officer/Director Detail

Date