

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N36210

**FILED**  
**Apr 11, 2015**  
**Secretary of State**  
**CC7222717106**

**Entity Name:** COUNTRY CLUB VILLAS I OF SPRING LAKE HOMEOWNERS'ASSOCIATION, INC.

**Current Principal Place of Business:**

2102 VILLAWAY EAST  
SEBRING, FL 33876

**Current Mailing Address:**

512 VILLAWAY NORTH  
SEBRING, FL 33876 US

**FEI Number: 59-3013492**

**Certificate of Status Desired: No**

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

TROIA, JOE  
2102 VILLAWAY EAST  
SEBRING, FL 33876 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: JOE TROIA

04/11/2015

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title SECRETARY  
Name GORUM, STEVE  
Address 2202 VILLAWAY EAST  
City-State-Zip: SEBRING FL 33876

Title TREASURER  
Name HARDEE, CONNIE  
Address 100 VILLAWAY N  
City-State-Zip: SEBRING FL 33876

Title DIRECTOR  
Name AASS, ROBERT  
Address 507 VILLAWAY N..  
City-State-Zip: SEBRING FL 33876

Title PD  
Name CALKINS, PHIL  
Address 1000 VILLAWAY WEST  
City-State-Zip: SEBRING FL 33876

Title VP  
Name SMITH, MIKE  
Address 217 GLEN MAR CIRCLE  
City-State-Zip: SEBRING FL 33876

*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: PHIL CALKINS

PRESIDENT

04/11/2015

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date