

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003961

Entity Name: SPENCERS CROSSING HOMEOWNERS ASSOCIATION, INC.

FILED
Apr 16, 2014
Secretary of State
CC5952991787

Current Principal Place of Business:

ONE SAN JOSE PLACE
27
JACKSONVILLE, FL 32257

Current Mailing Address:

P O BOX 57911
JACKSONVILLE, FL 32241 US

FEI Number: 59-3225327

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARR, LAUREN
ONE SAN JOSE PLACE
27
JACKSONVILLE, FL 32257 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

Officer/Director Detail :

Title PD
Name RICHTER, TODD
Address 3548 BARREL SPRINGS DR
City-State-Zip: ORANGE PARK FL 32073

Title DST
Name KAY, SIBERT
Address 3644 DOUBLE BRANCH LANE
City-State-Zip: ORANGE PARK FL 32073

Title D
Name GOODMAN, LORETTA
Address 3552 BARREL SPRINGS DRIVE
City-State-Zip: ORANGE PARK FL 32073

Title DVP
Name DUVALL, THOMAS
Address 350 WILLOW GREEN DRIVE
City-State-Zip: ORANGE PARK FL 32073

Title D
Name WILSON, RONALD
Address 3119 FOX SQUIRREL DR
City-State-Zip: ORANGE PARL FL 32073

Title D
Name ALQUIST, DENISE
Address 3138 FOX SQUIRREL DR
City-State-Zip: ORANGE PARK FL 32073

Title D
Name DEVOSE, IRIS
Address 3115 FOX SQUIRREL DR
City-State-Zip: ORANGE PARK FL 32073

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: TODD RICHTER

PRESIDENT

04/16/2014

Electronic Signature of Signing Officer/Director Detail

Date