

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2007 8:00 am
Secretary of State

01-16-2007 90187 019 ***150.00

DOCUMENT # 311887

1. Entity Name
SPRINGROSE INC



40002308



Principal Place of Business
**979 FLAMEVINE LANE
VERO BEACH FLA, 32963**

Mailing Address
**979 FLAMEVINE LANE
VERO BEACH, FL 32963**

2. Principal Place of Business - No P.O. Box #

2976 59TH AVE.

3. Mailing Address

2976 59TH AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01052007

Chg-P

CR2E034 (12/06)

City & State

VERO BEACH, FL

City & State

VERO BEACH, FL

4. FEI Number

59-1222622

Applied For

Not Applicable

Zip

32966

Country

U.S.

Zip

32966

Country

U.S.

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FROELICH, PETER G.
2976 59TH AVE
VERO BEACH, FL 32966**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **FROELICH, PETER G.**
STREET ADDRESS **2976 59TH AVE**
CITY-ST-ZIP **VERO BEACH, FL 32966**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **T** ☐ Delete
NAME **SPRINGER, JACQUELINE E**
STREET ADDRESS **999 FLAMEVINE LANE**
CITY-ST-ZIP **VERO BEACH, FL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **S** ☐ Delete
NAME **FROELICH, MARILYN**
STREET ADDRESS **2976 59TH AVE**
CITY-ST-ZIP **VERO BEACH, FL 32966**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **ROSE, EDWARD L. JR.**
STREET ADDRESS **969 FLAMEVINE AVE.**
CITY-ST-ZIP **VERO BEACH, FL 32963**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **ROSE, MITZI**
STREET ADDRESS **969 FLAMEVINE LANE**
CITY-ST-ZIP **VERO BEACH, FL 32963**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Peter G. Froelich **PETER G. FROELICH PRESIDENT 1/11/07 (772) 231-4755**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #