

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 21, 2008 8:00 am
Secretary of State

04-21-2008 90054 024 ****70.00

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1. Entity Name

SPRING LAKE VILLAS NO. 2 ASSOCIATION, INC.



Principal Place of Business

Mailing Address

**4295 NW 1 TERR
 POMPANO BEACH FL 33064**

**4295 NW 1 TERR
 POMPANO BEACH FL 33064**



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

3. Mailing Address

Suite, Apt. #, etc.

151 NW 42 ND COURT

Suite, Apt. #, etc.

151 NW 42 ND COURT

1st MOORE

CR2E037 (10/07)

City & State

POMPANO BCH FL

City & State

POMPANO BCH FL

4. FEI Number

59-1290822

Applied For

Not Applicable

Zip
33064

Country
USA

Zip
33064

Country
USA

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

**GURRERA, SALVATORE
 4275 NW 1ST TERR
 POMPANO BEACH FL 33064**

Name
JOHN BEDON

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

151 NW 42 ND COURT

City
POMPANO BCH

FL

Zip Code
33064

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

John Bedon

4105108

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
 Due By: May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P Delete
 NAME GURRERA, SALVATORE
 STREET ADDRESS 4295 NW 1ST TERR
 CITY-ST-ZIP POMPANO BEACH FL 33064

TITLE P Change Addition
 NAME JOHN BEDON
 STREET ADDRESS 151 NW 42 ND COURT
 CITY-ST-ZIP POMPANO BEACH FL 33064

TITLE V Delete
 NAME METHOD, JULIA
 STREET ADDRESS 4281 NW 1ST TERR
 CITY-ST-ZIP POMPANO BEACH FL 33064

TITLE V Change Addition
 NAME METHOD JULIA
 STREET ADDRESS 4281 NW 1ST TERR
 CITY-ST-ZIP POMPANO BEACH FL 33064

TITLE T Delete
 NAME GURRERA, ANGELA
 STREET ADDRESS 4295 NW 1 TERR
 CITY-ST-ZIP POMPANO BEACH FL 33064

TITLE T Change Addition
 NAME NANCY BEDON
 STREET ADDRESS 151 NW 42 ND COURT
 CITY-ST-ZIP POMPANO BCH. FL 33064

TITLE S Delete
 NAME GRATZ, RUTH F
 STREET ADDRESS 251 NW 42 CT
 CITY-ST-ZIP POMPANO BEACH FL 33064

TITLE S Change Addition
 NAME GRATZ RUTH F
 STREET ADDRESS 251 NW 42 CT
 CITY-ST-ZIP POMPANO BEACH FL 33064

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 Section 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 617, 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:

John Bedon

4105108

754 367 0718

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #