

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711957

FILED
Apr 22, 2009
Secretary of State

Entity Name: SPRING LAKE VILLAS NO. 2 ASSOCIATION, INC.

Current Principal Place of Business:

151 NW 42ND COURT
POMPANO BEACH, FL 330654

New Principal Place of Business:

C/O CCM, INC.
10034 W. MCNAB ROAD
TAMARAC, FL 33321

Current Mailing Address:

151 NW 42ND COURT
POMPANO BEACH, FL 330654

New Mailing Address:

C/O CCM, INC.
10034 W. MCNAB ROAD
TAMARAC, FL 33321

FEI Number: 59-1290822

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEDON, JOHN
151 NW 42ND COURT
POMPANO BEACH, FL 33064 US

Name and Address of New Registered Agent:

METHOD, JULIE
4821 NW 1ST TERRACE
POMPANO BEACH, FL 33060 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: JULIE METHOD

04/22/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BEDON, JOHN
Address: 151 NW 42ND COURT
City-St-Zip: POMPANO BEACH, FL 33068

Title: V (X) Delete
Name: METHOD, JJULIA
Address: 4281 NW 1ST TERR
City-St-Zip: POMPANO BEACH, FL 33060

Title: T (X) Delete
Name: BEDON, NANCY
Address: 151 NW 42ND COURT
City-St-Zip: POMPANO BEACH, FL 33064

Title: S (X) Delete
Name: GRATZ, RUTH F
Address: 251 NW 42 CT
City-St-Zip: POMPANO BEACH, FL 33064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: METHOD, JULIE
Address: 4821 NW 1ST TERRACE
City-St-Zip: POMPANO BEACH, FL 33060

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JULIE METHOD

VP

04/22/2009

Electronic Signature of Signing Officer or Director

Date