

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715690

FILED  
Feb 23, 2009  
Secretary of State

Entity Name: SPRING LAKE VILLAS NO. 3 ASSOCIATION, INC.

**Current Principal Place of Business:**

4331 NW 1ST TERRACE  
DEERFIELD BEACH, FL 33064 US

**New Principal Place of Business:**

**Current Mailing Address:**

4331 NW 1ST TERRACE  
DEERFIELD BEACH, FL 33064 US

**New Mailing Address:**

615 EMERALD WAY EAST  
DEERFIELD BEACH, FL 33442 US

FEI Number: 59-1779398

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GATOR MANAGEMENT OF SO. FL  
615 EMERALD WAY EAST  
DEERFIELD BEACH, FL 33442 US

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

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

**OFFICERS AND DIRECTORS:**

Title: STD ( ) Delete  
Name: FAZIO, STEPHANIE  
Address: 4381 NW 1ST TERRACE  
City-St-Zip: POMPANO BEACH, FL 33064

Title: PD ( ) Delete  
Name: SHERMAN, MARY  
Address: 4331 NW 1ST TERRACE  
City-St-Zip: POMPANO BCH, FL 33064

Title: VPD ( ) Delete  
Name: SNELL, ANN  
Address: 4309 NW 1ST TERR  
City-St-Zip: POMPANO BEACH, FL 33064

Title: D ( ) Delete  
Name: VALDES, ELIZABETH  
Address: 4303 NW 1ST TERR  
City-St-Zip: POMPANO BEACH, FL 33064

Title: MNGT (X) Delete  
Name: BIELER, JERRY  
Address: 615 EMERALD WAY  
City-St-Zip: DEERFIELD BEACH, FL 33442

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: FAZIO, STEPHANIE  
Address: 4381 NW 1ST TERRACE  
City-St-Zip: POMPANO BEACH, FL 33064

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

Title: STD (X) Change ( ) Addition  
Name: SNELL, ANN  
Address: 4309 NW 1ST TERR  
City-St-Zip: POMPANO BEACH, FL 33064

Title: VPD (X) Change ( ) Addition  
Name: VALDES, ELIZABETH  
Address: 4303 NW 1ST TERR  
City-St-Zip: POMPANO BEACH, FL 33064

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: JOAN S. BIELER

MGR

02/23/2009

Electronic Signature of Signing Officer or Director

Date