2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#720400

Apr 29, 2009 Secretary of State

Entity Name: THE SPRINGS COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

400 WOODBRIDGE RD. LONGWOOD, FL 32779

Current Mailing Address: New Mailing Address:

400 WOODBRIDGE RD LONGWOOD, FL 32779

FEI Number: 23-7160779 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

KLEMM, RUSSELL E 1065 MAITLAND CENTER COMMONS BLVD. MAITLAND, FL 32751

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:

City-St-Zip:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete FORTHUBER, DAVID Name: 121 AUTUMN DR Address: City-St-Zip: LONGWOOD, FL 32779

OFFICERS AND DIRECTORS:

Title: () Delete PARKE, SHARON Name: Address: 120 WOODMILL RD

Title: () Delete ALEXANDROWICZ, JERRY Name:

LONGWOOD, FL 32779

Address: 106 AUTUMN DR City-St-Zip: LONGWOOD, FL 32779

Title: () Delete Name: GRADY, PARTICK 311 PARTRIDGE LANE Address: City-St-Zip: LONGWOOD, FL 32779

Title: () Delete JOHNSTON, ROBERT Name: 100 AUTUMN DR Address: City-St-Zip: LONGWOOD, FL 32779

Title: () Delete SHAKAR, BOB Name: Address: 125 RED CEDAR DRIVE LONGWOOD, FL 32779 City-St-Zip:

(X) Change () Addition

ALEXANDROWICZ, JERRY Name: Address: 106 AUTUMN DR

City-St-Zip: LONGWOOD, FL 32779

Title: VD (X) Change () Addition

Name: GRADY, PATRICK Address: 311 PARTRIDGE LN City-St-Zip: LONGWOOD, FL 32779

Title: SD (X) Change () Addition

KAISER, TED Name: Address: 104 WEEPING ELM LN City-St-Zip: LONGWOOD, FL 32779

Title: TD (X) Change () Addition

Name: JOHNSTON, ROBERT Address: 100 AUTUMN DR City-St-Zip: LONGWOOD, FL 32779

Title: (X) Change () Addition

FORTHUBER, DAVID Name: 121 AUTUMN DR Address: City-St-Zip: LONGWOOD, FL 32779

Title: (X) Change () Addition

SHAKAR, BOB Name: Address: 125 RED CEDAR DR LONGWOOD, FL 32779 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: JERRY ALEXANDROWICZ PD 04/29/2009

Electronic Signature of Signing Officer or Director

Date