

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734112

FILED
Apr 09, 2008
Secretary of State

Entity Name: SILVER SPRINGS SHORES RESIDENTS' ASSOCIATION, INC.

Current Principal Place of Business:

590 SILVER ROAD
OCALA, FL 34472 US

New Principal Place of Business:

Current Mailing Address:

590 SILVER ROAD
OCALA, FL 34472 US

New Mailing Address:

FEI Number: 59-1656878

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KINDBERG, LEWIS
477 WATER RUN
OCALA, FL 34472 US

Name and Address of New Registered Agent:

KELLY, ED
590 SILVER ROAD
OCALA, FL 34472 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: ED KELLY

04/09/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KINDBERG, LEWIS
Address: 477 WATER RUN
City-St-Zip: OCALA, FL 34472

Title: VP () Delete
Name: LYON, THOMAS
Address: 14 SAPPHIRE RD
City-St-Zip: OCALA, FL 34472

Title: S () Delete
Name: JEMERY, PATRICIA
Address: 3 EMERALD RUN
City-St-Zip: OCALA, FL 34472

Title: T () Delete
Name: JEMERY, PATRICIA
Address: 3 EMERALD RUN
City-St-Zip: OCALA, FL 34472

Title: D () Delete
Name: LYON, WENDY
Address: 14 SAPPHIRE RD
City-St-Zip: OCALA, FL 34472

Title: D () Delete
Name: REID, BILL
Address: 1 REDWOOD RUN RADIAL
City-St-Zip: OCALA, FL 34472

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KELLY, ED
Address: 590 SILVER ROAD
City-St-Zip: OCALA, FL 34472

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

Title: S (X) Change () Addition
Name: LYON, WENDY
Address: 14 SAPPHIRE RD
City-St-Zip: OCALA, FL 34472

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: PATRICIA JEMERY

T

04/09/2008

Electronic Signature of Signing Officer or Director

Date