

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 736527

FILED
Mar 27, 2008
Secretary of State

Entity Name: SPRINGWOOD VILLAGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434, SUITE 5000
LONGWOOD, FL 327795044 US

New Principal Place of Business:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044 US

Current Mailing Address:

POST OFFICE BOX 2495
OCALA, FL 34478 US

New Mailing Address:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044 US

FEI Number: 59-1859371

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR
2180 W SR 434 STE 5000
LONGWOOD, FL 327795044 US

Name and Address of New Registered Agent:

HART, JAMES W JR
SENTRY MANAGEMENT INC
2180 WEST SR 434 SUITE 5000
LONGWOOD, FL 327795044 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: JAMES W HART JR

03/27/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GROGAN, BETTY
Address: 1538 SE 25TH STREET #4G
City-St-Zip: OCALA, FL 34471

Title: SD () Delete
Name: SAXTON, DIANE
Address: 1610 A SE 25TH ST
City-St-Zip: OCALA, FL 34471

Title: D () Delete
Name: MILLS, DIANE
Address: 1536 SE 27TH ST
City-St-Zip: OCALA, FL

Title: PD (X) Delete
Name: KNEELAND, NICK
Address: 2405 SE 16TH AVE. #10A
City-St-Zip: OCALA, FL 34471

Title: T/D () Delete
Name: LEARY, SHEILA
Address: 1567 SE 27TH ST
City-St-Zip: OCALA, FL 34471

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change () Addition
Name: SAXTON, DIANE
Address: 1610 SE 25TH ST #A
City-St-Zip: OCALA, FL 34471

Title: D (X) Change () Addition
Name: MILLS, DIANE
Address: 1536 SE 27TH ST
City-St-Zip: OCALA, FL 34471

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: BETTY GROGAN

PD

03/27/2008

Electronic Signature of Signing Officer or Director

Date