

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 736527

FILED
Jan 15, 2009
Secretary of State

Entity Name: SPRINGWOOD VILLAGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

25 E. SILVER SPRINGS BLVD.
OCALA, FL 34470 US

New Principal Place of Business:

2123 SW 20TH PLACE
OCALA, FL 34471 US

Current Mailing Address:

25 E. SILVER SPRINGS BLVD.
OCALA, FL 34470 US

New Mailing Address:

2123 SW 20TH PLACE
OCALA, FL 34471 US

FEI Number: 59-1859371

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSSHARDT PROPERTY MANAGEMENT, INC.
25 E. SILVER SPRINGS BLVD.
OCALA, FL 34470 US

Name and Address of New Registered Agent:

BOSSHARDT PROPERTY MANAGEMENT, INC.
2123 SW 20TH PLACE
OCALA, FL 34471 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: GARRY GRIFFIN

01/15/2009

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 SE 25TH ST #A
City-St-Zip: OCALA, FL 34471

Title: D () Delete
Name: MILLS, DIANE
Address: 1536 SE 27TH ST
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: PD (X) Change () Addition
Name: GROGAN, BETTY
Address: 1538 SE 25TH STREET UNIT G
City-St-Zip: OCALA, FL 34471

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

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

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

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: SHEILA LEARY

T/D

01/15/2009

Electronic Signature of Signing Officer or Director

Date