

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 18, 2008 8:00 am
Secretary of State

02-18-2008 90004 008 ****70.00

DOCUMENT # 738315	
1. Entity Name	
SEBRING FALLS PROPERTY OWNERS ASSOCIATION, INC.	

Principal Place of Business	Mailing Address
2100 CARIBBEAN RD. EAST SEBRING FL 33872	2100 CARIBBEAN RD. SEBRING FL 33872

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
Zip	Country

4. FEI Number	Applied For
59-1688078	No: Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
☒	

6. Name and Address of Current Registered Agent
HULBERT, BEVERLY 1551 ST THOMAS AVE SEBRING FL 33872

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE <i>Beverly Hulbert / Treasurer</i>	DATE 1-21-08

FILE NOW: FEE IS \$61.25 Due By May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to: Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE	DP ☒ Delete
NAME	HULBERT, WILLIAM
STREET ADDRESS	1551 ST THOMAS AVE
CITY-ST-ZIP	SEBRING FL 33872
TITLE	D ☒ Delete
NAME	FISCHER, DONALD
STREET ADDRESS	1559 ST THOMAS AVE
CITY-ST-ZIP	SEBRING FL 33872
TITLE	DVP ☐ Delete
NAME	SLOTTER, JOHN
STREET ADDRESS	1603 BERMUDA AVE.
CITY-ST-ZIP	SEBRING FL 33872
TITLE	D ☐ Delete
NAME	JENKINS, WILLIAMS
STREET ADDRESS	2211 BAHAMA RD
CITY-ST-ZIP	SEBRING FL 33872
TITLE	D ☐ Delete
NAME	MINGUS, BILL
STREET ADDRESS	1545 ST. THOMAS AVE.
CITY-ST-ZIP	SEBRING FL 33872
TITLE	D ☐ Delete
NAME	NOEL, MARION
STREET ADDRESS	2005 CARIBBEAN RD.
CITY-ST-ZIP	SEBRING FL 33872

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	D ☐ Change ☒ Addition
NAME	JOE JACKSON
STREET ADDRESS	1551 CARIBBEAN RD
CITY-ST-ZIP	SEBRING, FL. 33872
TITLE	D. ☐ Change ☒ Addition
NAME	EMORY PRICE
STREET ADDRESS	1560 ST. THOMAS AVE
CITY-ST-ZIP	SEBRING, FL. 33872
TITLE	PRES/D ☐ Change ☒ Addition
NAME	HOUSTON FAIRCHILD
STREET ADDRESS	1543 CARIBBEAN RD
CITY-ST-ZIP	SEBRING, FL. 33872
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Beverly R. Hulbert (BEVERLY R. Hulbert)* 863-314-0606