2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2011
Secretary of State

DOCUMENT# 738402

Entity Name: SPRINGWOOD VILLAGE HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

6156 SABAL POINT CIRCLE
PORT ORANGE, FL 32128

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 291282
PORT ORANGE, FL 32129

New Mailing Address:

FEI Number: 59-1796883 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KOCH, KAREN
6156 SABAL POINT CIRCLE
PORT ORANGE, FL 32128 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P
Name: FORD, BRYAN
Address: 180 MOONSTONE COURT
City-St-Zip: PORT ORANGE, FL 32129

Title: ST
Name: CHILDRESS, SHARON
Address: 132 MOONSTONE CT
City-St-Zip: PORT ORANGE, FL 32129

Title: D
Name: KALISIAK, IWONA
Address: 675 HERBERT STREET
City-St-Zip: PORT ORANGE, FL 32129

Title: D
Name: LARUE, ED
Address: 89 MOONSTONE CT
City-St-Zip: PORT ORANGE, FL 32129

Title: D
Name: SANCLEMENTE, LEON
Address: 1234 EDNA COURT
City-St-Zip: PORT ORANGE, FL 32129

I hereby 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 all other like empowered.

SIGNATURE: SHARON CHILDRESS ST 02/01/2011

Electronic Signature of Signing Officer or Director — Date