

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

FILED
Apr 11, 2008 8:00 am
Secretary of State

04-11-2008 90044 035 ****61.25

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1. Entity Name

SEVEN SPRINGS OF THE PALM BEACHES, INC.



Principal Place of Business

1650 N. MILITARY TR.
#102
WEST PALM BEACH FL 33409

Mailing Address

1650 N. MILITARY TR.
#102
WEST PALM BEACH FL 33409



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

4010 South 57th Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

204

City & State

City & State

Greenacres FL

Zip

Country

Zip

33463

Country

33463

4. FEI Number

59-1846692

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/07)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ST. JOHN, CORE, FIORE, LEMME, P.A.A
1601 FORUM PLACE
STE. 701
WEST PALM BEACH FL 33401

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

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: P
NAME: MERCER, CHUCK
STREET ADDRESS: 6264 A SEVEN SPRINGS BLVD.
CITY-ST-ZIP: GREENACRES FL 33463 ☒ Delete

TITLE: Vice-President
NAME: Susan Swing
STREET ADDRESS: 6327 D Seven Springs Blvd.
CITY-ST-ZIP: Greenacres FL 33463 ☐ Change ☒ Addition

TITLE: V
NAME: WISNIEWSKI, ROBERT
STREET ADDRESS: 6351 B SEVEN SPRINGS BLVD.
CITY-ST-ZIP: GREENACRES FL 33463 ☒ Delete

TITLE: Director
NAME: Shane Hatcher
STREET ADDRESS: 6294 C Seven Springs Blvd
CITY-ST-ZIP: Greenacres FL 33463 ☐ Change ☒ Addition

TITLE: S
NAME: LEHMBECK, JEANIE
STREET ADDRESS: 6279 A SEVEN SPRINGS BLVD.
CITY-ST-ZIP: GREENACRES FL 33463 ☒ Delete

TITLE: Director
NAME: Grace Mercer
STREET ADDRESS: 6264 A Seven Springs Blvd.
CITY-ST-ZIP: Greenacres FL 33463 ☐ Change ☒ Addition

TITLE: D
NAME: METSKI, PAMELA
STREET ADDRESS: 6332 C SEVEN SPRINGS BLVD.
CITY-ST-ZIP: GREENACRES FL 33463 ☐ Delete

TITLE: Secretary
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☒ Change ☐ Addition

TITLE: T
NAME: SCUDIERO, JACKIE
STREET ADDRESS: 6351 A SEVEN SPRINGS BLVD.
CITY-ST-ZIP: GREENACRES FL 33463 ☐ Delete

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☐ Change ☐ Addition

TITLE: D
NAME: DIX, SANDRA
STREET ADDRESS: 6332 DB SEVEN SPRINGS BLVD.
CITY-ST-ZIP: GREENACRES FL 33463 ☐ Delete

TITLE: President
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☒ Change ☐ Addition

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:

Susan Swing

3/14/08