

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753925

FILED
Apr 30, 2008
Secretary of State

Entity Name: SPRUCE CREEK GOLF VILLAS, INC.

Current Principal Place of Business:

GOLDEN ROD/SEA GRAPE/ CLEMATIS
SILVER FERN/ JASMINE/ PRIMROSE
PORT ORANGE, FL 32128 US

New Principal Place of Business:

Current Mailing Address:

4168 S ATLANTIC AVENUE
NEW SMYRNA BEACH, FL 32169 US

New Mailing Address:

FEI Number: 59-2313755 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SURFCOAST REALTY, INC.
4168 S ATLANTIC AVENUE
NEW SMYRNA BEACH, FL 32169 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: TD () Delete
Name: FUDGE, JOHN
Address: 2582 JASMINE RD
City-St-Zip: PORT ORANGE, FL 32128

Title: PD () Delete
Name: SCHMIDT, BEVERLY
Address: 2570 JASMINE RD.
City-St-Zip: PORT ORANGE, FL 32128

Title: D () Delete
Name: BARTON, PAM
Address: 2578 JASMINE RD
City-St-Zip: PORT ORANGE, FL 32128

Title: SD () Delete
Name: BENHAM, WILLIAM
Address: 1907 GOLDEN ROD WAY
City-St-Zip: PORT ORANGE, FL 32128

Title: T () Delete
Name: CARTER, GREGORY L
Address: 2592 JASMINE ROAD
City-St-Zip: PORT ORANGE, FL 32128

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FUDGE, JOHN
Address: 2582 JASMINE RD
City-St-Zip: PORT ORANGE, FL 32128

Title: D (X) Change () Addition
Name: FIUMARA, MICHAEL
Address: 1894 SILVER FERN DRIVE
City-St-Zip: PORT ORANGE, FL 32128

Title: SD (X) Change () Addition
Name: SCHNACK, LEON
Address: 1893 SEA GRAPE WAY
City-St-Zip: PORT ORANGE, FL 32128

Title: T (X) Change () Addition
Name: CARTER, GREGORY L
Address: 2592 JASMINE ROAD
City-St-Zip: PORT ORANGE, FL 32128

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: JOHN FUDGE

PD

04/30/2008

Electronic Signature of Signing Officer or Director

_____ Date