

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753925

FILED  
Jan 06, 2009  
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 ( )

**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: PD ( ) Delete  
Name: FUDGE, JOHN  
Address: 2582 JASMINE RD  
City-St-Zip: PORT ORANGE, FL 32128

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

Title: SD ( ) Delete  
Name: SCHNACK, LEON  
Address: 1893 SEA GRAPE 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

Title: T (X) 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: CARTER, GREGORY  
Address: 2592 JASMINE RD  
City-St-Zip: PORT ORANGE, FL 32128

Title: SD (X) Change ( ) Addition  
Name: BARTON, PAM  
Address: 2578 JASMINE ROAD  
City-St-Zip: PORT ORANGE, FL 32128

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

Title: SD (X) Change ( ) Addition  
Name: PFLANZER, PATRICIA  
Address: 1913 GOLDEN ROD WAY  
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: ROBERT DEL ROSE

PM

01/06/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date