

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**

**Feb 11, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # F36748**

1. Entity Name  
**SPRUCE CREEK REALTY CORPORATION**



Principal Place of Business

**202 CESSNA BLVD  
PORT ORANGE, FL 32128 US**

Mailing Address

**202 CESSNA BLVD  
DAYTONA BCH, FL 32128-6729 US**



02062008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-2872457</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**OHLSSON, LEONARD  
202 CESSNA BLVD  
PORT ORANGE, FL 32128**

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

UG0000022877  
02/20/08-80015-009 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	OHLSSON, LEONARD
STREET ADDRESS	160 COUNTRY CIRCLE DR EAST
CITY-ST-ZIP	PORT ORANGE, FL 32128

TITLE
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STREET ADDRESS
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, 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:**

*Leonard Ohlsson*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2/8/08** **386-788-4991**  
Date Daytime Phone #