

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000001598

Entity Name: THREE SPRINGS, INC.

FILED  
Apr 23, 2009  
Secretary of State

## Current Principal Place of Business:

1131 EAGLETREE LANE  
HUNTSVILLE, AL 35801

## New Principal Place of Business:

## Current Mailing Address:

1131 EAGLETREE LANE  
HUNTSVILLE, AL 35801

## New Mailing Address:

FEI Number: 63-0889709

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SALIBA, GARY  
Address: 112 SOUTHSIDE SQUARE SUITE C  
City-St-Zip: HUNTSVILLE, AL 35801

Title: T ( ) Delete  
Name: THOMASON, ANDREA  
Address: 1131 EAGLETREE LANE  
City-St-Zip: HUNTSVILLE, AL 35801

Title: V ( ) Delete  
Name: LANEY, SHARON  
Address: 1131 EAGLETREE LANE  
City-St-Zip: HUNTSVILLE, AL 35801

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: CFO (X) Change ( ) Addition  
Name: THOMASON, ANDREA  
Address: 1131 EAGLETREE LANE  
City-St-Zip: HUNTSVILLE, AL 35801

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T ( ) Change (X) Addition  
Name: KOSLOW, STEVE  
Address: 2828 DRAKE AVENUE  
City-St-Zip: HUNTSVILLE, AL 35805

Title: S ( ) Change (X) Addition  
Name: FALLON, ROBERT  
Address: 418 RAINBOW DRIVE  
City-St-Zip: MADISON, AL 35758

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANDREA THOMASON

CFO

04/23/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date