2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2009
Secretary of State

DOCUMENT# G79996

Entity Name: SPRINGS-EAST APTS., INC.

Current Principal Place of Business:

125 N DAVIS LN
APT.11
DEFUNIAK SPRINGS, FL 32433

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 111
DEFUNIAK SPRINGS, FL 32435

New Mailing Address:

FEI Number: 59-2355274 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCCORMICK, FRANKIE
6000 CO. HWY 278
DEFUNIAK SPGS, FL 32435 US

Name and Address of New Registered Agent:

MCCORMICK, LISA
125 N. DAVIS LANE
#11
DEFUNIAK SPGS, FL 32435 US

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: LISA S. MCCORMICK 02/13/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MCCORMICK, GERALD D
Address: 432 TEELINVILLE DRIVE
City-St-Zip: DEFUNIAK SPRINGS, FL 32435

Title: SD ( ) Delete
Name: MCCORMICK, FRANKIE
Address: 6000 COY BURGESS LOOP
City-St-Zip: DEFUNIAK SPRINGS,, FL 32435

Title: VD ( ) Delete
Name: MCCORMICK, LISA S
Address: 432 TEELINVILLE DR
City-St-Zip: DEFUNIAK SPRGS, FL 32435

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: MCCORMICK, GERALD D
Address: 432 TEELINVILLE DRIVE
City-St-Zip: DEFUNIAK SPRINGS, FL 32435

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

Title: VP (X) Change ( ) Addition
Name: MCCORMICK, LISA S
Address: 432 TEELINVILLE DR
City-St-Zip: DEFUNIAK SPRGS, FL 32435

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: LISA S. MCCORMICK VP 02/13/2009
Electronic Signature of Signing Officer or Director Date