

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006305

FILED  
Feb 02, 2009  
Secretary of State

**Entity Name:** GLEN SPRINGS PRESERVATION ASSOCIATION, INC.

**Current Principal Place of Business:**

2329 NW 30TH TERRACE  
GAINESVILLE, FL 32605

**New Principal Place of Business:**

**Current Mailing Address:**

2329 NW 30TH TERRACE  
GAINESVILLE, FL 32605

**New Mailing Address:**

**FEI Number:** 59-3750572

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

O'BRIEN, BONNIE  
2329 NW 30TH TERR.  
GAINESVILLE, FL 32605 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: DP ( ) Delete  
Name: DAME, SHARON  
Address: 3321 NW 26TH TERRACE  
City-St-Zip: GAINESVILLE, FL 32605

Title: DV ( ) Delete  
Name: FURLOW, LEONARD PH.D  
Address: 3001 NW 28TH TERRACE  
City-St-Zip: GAINESVILLE, FL 32605

Title: DST ( ) Delete  
Name: O'BRIEN, BONNIE  
Address: 2329 NW 30TH TERRACE  
City-St-Zip: GAINESVILLE, FL 32605

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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: BONNIE O'BRIEN

DST

02/02/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date