

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01757

FILED  
Apr 30, 2008  
Secretary of State

**Entity Name:** SPANISH PLAZA OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

SPANISH PLAZA  
638 EAST THIRD AVE  
NEW SMYRNA BEACH, FL 32169

**New Principal Place of Business:**

**Current Mailing Address:**

SPANISH PLAZA  
638 EAST THIRD AVE  
NEW SMYRNA BEACH, FL 32169

**New Mailing Address:**

**FEI Number:** 59-2553602

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TREGO, HEATHER  
628 THIRD AVE.  
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: VP ( ) Delete  
Name: SAMPLES, J.S. D.C.  
Address: 622 3RD AVENUE  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: ST ( ) Delete  
Name: TREGO, HEATHER L  
Address: 628 3RD AVE  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: P ( ) Delete  
Name: BROWN, SCOTT  
Address: 1909 S RIVERSIDE CIR.  
City-St-Zip: NEW SMYRNA BCH, FL 32141

**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: SCOTT BROWN

PRES

04/30/2008

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

\_\_\_\_\_  
Date