

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000037

FILED  
Jun 06, 2007  
Secretary of State

**Entity Name:** HIGH SPRINGS COMMUNITY DEVELOPMENT CORPORATION

**Current Principal Place of Business:**

235 NW 2ND ST  
HIGH SPRINGS, FL 32643

**New Principal Place of Business:**

95 NW 1ST AVENUE  
HIGH SPRINGS, FL 32643

**Current Mailing Address:**

P.O. BOX 1868  
HIGH SPRINGS, FL 32655

**New Mailing Address:**

**FEI Number:** 30-0034228      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

CRAWFORD, DAVID  
10618 NW 60TH TERRACE  
ALACHUA, FL 32615 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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: DODSON, JIM  
Address: 187 SE CATALDO GLEN  
City-St-Zip: HIGH SPRINGS, FL 32643

Title: V ( ) Delete  
Name: KOSTEK, BRIDGETTE  
Address: 110 NE 1ST AVE  
City-St-Zip: HIGH SPRINGS, FL 32643

Title: MAL ( ) Delete  
Name: EPPENSTEIN, KIRK  
Address: P.O. BOX 205  
City-St-Zip: HIGH SPRINGS, FL 32655

Title: T ( ) Delete  
Name: TURCHYN, SUSAN  
Address: 27264 NW 203 PLACE  
City-St-Zip: HIGH SPRINGS, FL 32643

Title: S ( ) Delete  
Name: HALL, JESSICA  
Address: P.O. BOX 358  
City-St-Zip: HIGH SPRINGS, FL 32655

Title: MAL ( ) Delete  
Name: HEUSS, CONSTANCE  
Address: 6823 NW 218 ST  
City-St-Zip: ALACHUA, FL 32615

**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:

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: KIRK EPPENSTEIN

MAL

06/06/2007

Electronic Signature of Signing Officer or Director

Date