

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:

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

_____ Electronic Signature of Signing Officer or Director

MAL

06/06/2007

_____ Date