

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001333

FILED
Apr 16, 2009
Secretary of State

Entity Name: NEOSPRINGS, INC.

Current Principal Place of Business:

11528 NW 16TH LANE
GAINESVILLE, FL 32606 US

New Principal Place of Business:

1000 NE 16TH AVE
BUILDING C
GAINESVILLE, FL 32601 US

Current Mailing Address:

11528 NW 16TH LANE
GAINESVILLE, FL 32606 US

New Mailing Address:

FEI Number: 43-1999055 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GORDU, FATIH
11528 NW 16TH LANE
GAINESVILLE, FL 32606 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: GORDU, FATIH
Address: 11528 NW 16TH LANE
City-St-Zip: GAINESVILLE, FL 32606 US

Title: VP () Delete
Name: BASLANTI, UGUR
Address: 11528 NW 16TH LANE
City-St-Zip: GAINESVILLE, FL 32606 US

Title: VP () Delete
Name: ALPTEKINOGLU, AYDIN DR
Address: 11528 NW 16TH LANE
City-St-Zip: GAINESVILLE, FL 32606 US

Title: TR () Delete
Name: KAHVECI, TAMER DR
Address: 11528 NW 16TH LANE
City-St-Zip: GAINESVILLE, FL 32606 US

Title: S () Delete
Name: GEGA, ARJET DR
Address: 11528 NW 16TH LANE
City-St-Zip: GAINESVILLE, FL 32606 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: KAHVECI, TAMER DR
Address: 11528 NW 16TH LANE
City-St-Zip: GAINESVILLE, FL 32606 US

Title: TR (X) Change () Addition
Name: TOPSAKAL, OGUZHAN DR
Address: 11528 NW 16TH LANE
City-St-Zip: GAINESVILLE, FL 32606 US

Title: S (X) Change () Addition
Name: YASUN, EMIR
Address: 11528 NW 16TH LANE
City-St-Zip: GAINESVILLE, FL 32606 US

Title: VP (X) Change () Addition
Name: BASLANTI, UGUR
Address: 11528 NW 16TH LANE
City-St-Zip: GAINESVILLE, FL 32606 US

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: FATIH GORDU

P

04/16/2009

Electronic Signature of Signing Officer or Director

Date