2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Apr 29, 2005 08:00 AV

DOCU 1. Entity Nan	MENT # N030000050	59			Secreta		
MCLA SF	PRING HILL UNIT, INC	ž					
Principal Plac	ce of Business	Mailing Address		 			
8405 SUNSHINE GROVE RD BROOKSVILLE FL 34613 US		8405 SUNSHINE GROVE RD BROOKSVILLE FL 34613 US		33990091901		26 WILL'S RESTAY BETTAY ABOUT	a) #7 (\$*B1
2. Principal f	Place of Business	3. Mailing Address	 				
Suite, Apt	. *, etc.	Suite, Apt #, etc.	<u> </u>	1st MC	OORE CR2E03	37 (10/04)	
City & State		City & State		4. FEI Number 38-3683092 Applied For Not Applicable			
Zip	Country	Zip .	Country	5. Certificate of St	·	\$8.75 Addit Fee Required	ional
}	6. Name and Address of Current	Registered Agent	Name	7. Name and Add	ress of New Registered	Agent	
SMITH, BARBARA J 8405 SUNSHINE GROVE RD BROOKSVILLE FL 34613				Street Address (P.O. Box Number is Not Acceptable)			
			Speet Address	ss (F.O. BOX Multiper is i			
			City		FL	Zip Code	
8. The above	a named entity submits this statement for	or the purpose of changing its	egistered office or regis	stered agent, or both, in	<u> </u>		nd accept
	itions of registered agent.			. · · · · · · · · · · · · · · · · · · ·		e ·	•
SIGNATURE	Signature, typed or printed name of registered agent	and trig if applicable (NOTE	Registered Agent agnalute requ	ured when (existating)	CATE		<u></u>
	FILE NOW: FEE IS \$61.25 9. Election Camp Due By May 1, 2005 Trust Fund Co						
		**	· · · · -	\$5.00 May Be Added to Fees	Make Chec Florida Depai	k Payable to	
10.	Due By May 1, 2005 OFFICERS AND DI	Trust Fund Co	· · · · -	Added to Fees		rtment of St	ate
10. TITLE NAME	Due By May 1, 2005 OFFICERS AND DIE MRS SMITH, BARBARA J	Trust Fund Co	nontribution.	Added to Fees	Florida Depar	rtment of St	ate
10 .	Due By May 1, 2005 OFFICERS AND DIE	Trust Fund Co	11.	Added to Fees	Florida Depar	rtment of St	ate 10
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND DIE MRS SMITH, BARBARA J 8405 SUNSHINE GROVE RD BROOKSVILLE FL 34613 MRS	Trust Fund Co	T11. ITTLE NAME STREET ADDRESS CITY-ST-ZIP TOLE	Added to Fees	Florida Departs TO OFFICERS AND D	rtment of St	ate 10
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rhereby detay that the minimators supplied with his limit does not quality for the execution stated in Section 19.07(3)(f), Florida Statutes, further certify that the monthlation indicated on this report or supplied with a position 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Land Typed of Printed NAME OF SIGNING OFFICER OR DIRECTOR Date Date Date Depting Profes F