

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001444

FILED
Mar 06, 2006
Secretary of State

Entity Name: SPRINGBROOK HOMES ASSOCIATION, INC.

Current Principal Place of Business:

508-A CAPITAL CIRCLE SE
TALLAHASSEE, FL 32301

New Principal Place of Business:

214 DOGWOOD FOREST
CRAWFORDVILLE, FL 32327

Current Mailing Address:

508-A CAPITAL CIRCLE SE
TALLAHASSEE, FL 32301

New Mailing Address:

214 DOGWOOD FOREST
CRAWFORDVILLE, FL 32327

FEI Number: 65-1221752

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, SUSAN S
3520 THOMASVILLE RD
4TH FLOOR
TALLAHASSEE, FL 32309 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: D () Delete
Name: TURNER, DOUGLAS E
Address: 508-A CAPITAL CIRCLE SE
City-St-Zip: TALLAHASSEE, FL 32301

Title: D () Delete
Name: SAXON, FRED
Address: 508-A CAPITAL CIRCLE SE
City-St-Zip: TALLAHASSEE, FL 32301

Title: D () Delete
Name: O'REILLY, JOHN
Address: 508-A CAPITAL CIRCLE SE
City-St-Zip: TALLAHASSEE, FL 32301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MARY, DARNELL H
Address: 214 DOGWOOD FOREST
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: D (X) Change () Addition
Name: LOLLIS, KATHY
Address: 150 DOGWOOD FOREST
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: D (X) Change () Addition
Name: LEBOEUF, BEVERLY
Address: 200 DOGWOOD FOREST
City-St-Zip: CRAWFORDVILLE, FL 32327

I hereby certify that the information supplied with this filing does not qualify for the 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: MARY H DARNELL

PRES

03/06/2006

Electronic Signature of Signing Officer or Director

Date