
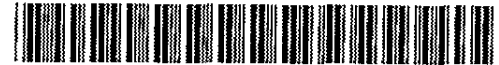


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 05, 2007 08:00 AM
Secretary of State

DOCUMENT # N05000001181	
1. Entity Name SPIRIT HILLS PROPERTY OWNERS ASSOCIATION, INC.	

Principal Place of Business 11 NORTH MAIN STREET BROOKSVILLE, FL 34601	Mailing Address 11 NORTH MAIN STREET BROOKSVILLE, FL 34601
---	---



06272007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-2293354	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BUCKNER, ROBERT 11 NORTH MAIN STREET BROOKSVILLE, FL 34601
--

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) **DATE** _____

Filing Fee is \$61.25 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
--	---

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUCKNER, ROBERT 11 NORTH MAIN STREET BROOKSVILLE, FL 34601
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MANUEL, JR., CLIFFORD E 966 CANDLELIGHT BOULEVARD BROOKSVILLE, FL 34601
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TALOR, MARK C 13209 OLD CRYSTAL RIVER ROAD BROOKSVILLE, FL 34601
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000767147
07/06/07-80002-014 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **Robert A. Buckner Pres.** **6/27/07** **352-798-4544**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #