

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Apr 16, 2008
Secretary of State

DOCUMENT# N05000009057

Entity Name: SUMTER CROSSING PROPERTY OWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**4260 NE 35 STREET
OCALA, FL 34479 US**New Principal Place of Business:****Current Mailing Address:**4260 NE 35 STREET
OCALA, FL 34479 US**New Mailing Address:****FEI Number:** 20-4209667**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DEICHMAN, NANCY
2300 S PINE AVE
OCALA, FL 34471 US**Name and Address of New Registered Agent:**VANDEVEN, HARVEY
4260 NE 35TH STREET
OCALA, FL 34479 US

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: HARVEY VANDEVEN

04/16/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** D () Delete
Name: VANDEVEN, HARVEY
Address: 4260 NE 35TH STREET
City-St-Zip: Ocala, FL 34479**Title:** D () Delete
Name: FABIAN, JOHN E JR
Address: 2631 SE 58TH AVE
City-St-Zip: Ocala, FL 34472**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****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: HARVEY VANDEVEN

D

04/16/2008

Electronic Signature of Signing Officer or Director

Date