

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011527

FILED
Mar 20, 2008
Secretary of State

Entity Name: BLUE SPRING LAKE HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 20-4235518

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR.
2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

HART, JAMES W JR.
SENTRY MANAGEMENT INC
2180 WEST SR 434 SUITE 5000
LONGWOOD, FL 32779 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: JAMES W HART JR

03/20/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MINHAS, MAX R
Address: 1592 KENNESAW DR.
City-St-Zip: CLERMONT, FL 34711

Title: DVPT () Delete
Name: CRAWFORD, JIMMY D
Address: 1635 EAST SR 50 SUITE 301
City-St-Zip: CLERMONT, FL 34711

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD (X) Change () Addition
Name: MINHAS, MAX R
Address: 1592 KENNESAW DR.
City-St-Zip: CLERMONT, FL 34711

Title: PD (X) Change () Addition
Name: COUSINS, TINA M
Address: ABBEY RD/SERGEANT PEPPER DR
City-St-Zip: HOWEY IN THE HILLS, FL 34737

Title: VPD () Change (X) Addition
Name: COUSINS, RICHARD
Address: ABBEY RD/SERGEANT PEPPER DR
City-St-Zip: HOWEY IN THE HILLS, FL 34737

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: TINA M COUSINS

PD

03/20/2008

Electronic Signature of Signing Officer or Director

Date