

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012826

FILED  
Apr 29, 2008  
Secretary of State

**Entity Name:** SPRINGVIEW COMMERCE PARK CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1920 BOOTHE CIRCLE  
SUITE 110  
LONGWOOD, FL 32750

**New Principal Place of Business:**

210 SPRINGVIEW COMMERCE DR.  
SUITE 120  
DEBARY, FL 32713

**Current Mailing Address:**

1920 BOOTHE CIRCLE  
SUITE 110  
LONGWOOD, FL 32750

**New Mailing Address:**

210 SPRINGVIEW COMMERCE DR.  
SUITE 120  
DEBARY, FL 32713

FEI Number: 20-4299834

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SHARP, DUDLEY Q JR.  
369 N. NEW YORK AVENUE  
3RD FLOOR  
WINTER PARK, FL 32789 US

**Name and Address of New Registered Agent:**

SHOCKLEY, TERRY K MR.  
210 SPRINGVIEW COMMERCE DRIVE  
UNIT 120  
DEBARY, FL, FL 32713 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: TERRY K. SHOCKLEY

04/29/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete  
Name: HALL, JON M SR.  
Address: 1920 BOOTHE CIRCLE #110  
City-St-Zip: LONGWOOD, FL 32750

Title: VSD ( ) Delete  
Name: DYKES, SUSAN  
Address: 1920 BOOTHE CIRCLE #110  
City-St-Zip: LONGWOOD, FL 32750

Title: D ( ) Delete  
Name: M. PAUL GODDARD,  
Address: 140 ALEXANDRIA BOULEVARD #E  
City-St-Zip: OVIEDO, FL 327656031

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: SHOCKLEY, TERRY K MR.  
Address: 210 SPRINGVIEW COMMERCE DR.  
City-St-Zip: DEBARY,, FL 32713

Title: VP (X) Change ( ) Addition  
Name: LUKAS, MYRICE  
Address: 395 GOBBERS LODGE RD.  
City-St-Zip: OSTEEN, FL 32764

Title: TRES (X) Change ( ) Addition  
Name: SANDRA K. SHOCKLEY,  
Address: 210 SPRINGVIEW COMMERCE DRIVE  
City-St-Zip: DEBARY, FL 32713

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: TERRY K. SHOCKLEY

PRES

04/29/2008

Electronic Signature of Signing Officer or Director

Date