## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000001865

FILED Jan 05, 2009 Secretary of State

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

**Current Principal Place of Business: New Principal Place of Business:** 

5205 S. ORANGE AVE. STE. 206 ORLANDO, FL 32809

**New Mailing Address: Current Mailing Address:** 

5205 S. ORANGE AVE. STE. 206 ORLANDO, FL 32809

FEI Number: 20-4874368 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

HOUSE OF MGMT. ENTERPRISES FOR COMM. 5205 S. ORANGE AVE. STE. 206 ORLANDO, FL 32809

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:

City-St-Zip:

Name:

Address:

City-St-Zip:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

5401 KIRKMAN ROAD SUITE 310

MINHAS, MAX

ORLANDO, FL 32819

(X) Change ( ) Addition

() Delete MINHAS, MAX Name: Address: 1635 E. SR 50, SUITE 301 City-St-Zip: CLERMONT, FL 34711

Title: PD (X) Delete Title: () Change () Addition

Name: MINHAS, MAX Address:

Name: 5401 KIRMAN ROAD STE, 310 Address: ORLANDO, FL 32819 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: MAX MINHAS Ρ 01/05/2009