## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **Secretary of State** DOCUMENT # N06000003163 02-06-2007 90007 030 \*\*\*\*70.00 **ROLLING HILLS HOME & PROPERTY OWNERS** ASSOCIATION, INC. Principal Place of Business Mailing Address 13470 SW 80TH ST. 13470 SW 80TH ST. DUNNELLON, FL 34432-3209 DUNNELLON, FL 34432-3209 3. Mailing Address SAME 2. Principal Place of Business - No P.O. Box # SAME Suite, Apt. #, etc. Suite, Apt. #, etc. 01282007 Chg-NP CR2E037 (12/06) City & State Applied For City & State 4. FEI Numbe Not Applicable Country \$8.75 Additional Zip Country Zip 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SPRANKEL, LARRY Street Address (P.O. Box Number is Not Acceptable) 13470 SW 80TH ST. DUNNELLON, FL 34432-3209 City Zip Code 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 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution Florida Department of State Due by May 1, 2007 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ☐ Delete Addition TITLE TITL F Change 1 NAME SPRANKEL, LARRY STREET ADDRESS 13470 SW 80TH ST. STREET ADDRESS **DUNNELLON, FL 344323209** CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE ☐ Change SPRANKEL, EARLEEN NAME STREET ADDRESS 13470 SW 80TH ST. STREET ADDRESS **DUNNELLON, FL 344323209** CfTY-ST-ZiP CITY-ST-ZIP D TITLE ☐ Delete TITLE ☐ Change ☐ Addition MALLONEE, RALPH 12190 SW 62 PL STREET ADDRESS STREET ADORESS CITY-ST-ZIP OCALA, FL 34481 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS

CITY-ST-ZIP

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.

2-4-07

FILED

Feb 06, 2007 8:00 am