

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007231

FILED
May 19, 2009
Secretary of State

Entity Name: SPRINGWOOD ESTATES UNIT III HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

15275 ALBA DR.
SPRING HILL, FL 34604

New Principal Place of Business:

15276 ALBA DR.
SPRING HILL, FL 34604

Current Mailing Address:

15275 ALBA DR.
SPRING HILL, FL 34604

New Mailing Address:

15276 ALBA DR.
SPRING HILL, FL 34604

FEI Number: 77-0676341 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CIPRIANI, CHARLES F
15275 ALBA DR.
SPRING HILL, FL 34604 US

Name and Address of New Registered Agent:

CIPRIANI, CHARLES F
15276 ALBA DR.
SPRING HILL, FL 34604 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: CHARLES F. CIPRIANI

05/19/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DIR () Delete
Name: LONGMAN, SUSAN
Address: 15553 EASTWOOD TRAIL
City-St-Zip: BROOKSVILLE, FL 34604

Title: DIR () Delete
Name: BRAHE, CHAMP
Address: 15537 EASTWOOD TRAIL
City-St-Zip: BROOKSVILLE, FL 34604

Title: DIR () Delete
Name: CAMACHO, MIKI
Address: 15271 DYLA WAY
City-St-Zip: BROOKSVILLE, FL 34604

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change () Addition
Name: FAGAN, MICHAEL
Address: 15246 ALBA DR.
City-St-Zip: BROOKSVILLE, FL 34604

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DIR (X) Change () Addition
Name: SOSNA, WESLEY
Address: 15521 EASTWOOD TRAIL
City-St-Zip: BROOKSVILLE, FL 34604

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: CHAMP K. BRAHE

DIR

05/19/2009

Electronic Signature of Signing Officer or Director

Date