

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007777

FILED
May 01, 2007
Secretary of State

Entity Name: NEW SPRINGS, INC.

Current Principal Place of Business:

3414 PARK SQUARE SOUTH
APT 4
TAMPA, FL 33613

New Principal Place of Business:

Current Mailing Address:

3414 PARK SQUARE SOUTH
APT 4
TAMPA, FL 33613

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

GUVENC, ISMAIL
3414 PARK SQUARE SOUTH
APT 4
TAMPA, FL 33613 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GUVENC, ISMAIL
Address: 3414 PARK SQUARE SOUTH, APT 4
City-St-Zip: TAMPA, FL 33613

Title: V () Delete
Name: OZEK, SERKAN
Address: 4202 E. FOWLER AVE. #30712
City-St-Zip: TAMPA, FL 33620

Title: S () Delete
Name: YILDIRIM, NECMETTIN
Address: 6210 SHELTON ROAD, #2706
City-St-Zip: TAMPA, FL 33615

Title: M () Delete
Name: YUCEK, TEVFIK
Address: 3414 PARK SQUARE SOUTH, #4
City-St-Zip: TAMPA, FL 33613

Title: M () Delete
Name: HAMLETT, CHRIS
Address: 2425 SILVERMOSS DR
City-St-Zip: WESLEY CHAPEL, FL 33543

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: () Change () Addition
Name:
Address:
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: ISMAIL GUVENC

P

05/01/2007

Electronic Signature of Signing Officer or Director

_____ Date