2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# N06000010270

Entity Name: SPRING LAKE TOWNHOMES OF HILLSBOROUGH COUNTY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2502 NORTH ROCKY POINT DRIVE SUITE 1050
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

2502 NORTH ROCKY POINT DRIVE SUITE 1050
TAMPA, FL 33607

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STROHAUER, GARY N ESQ
1150 CLEVELAND STREET SUITE 300
CLEARWATER, FL 33755 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: DP ( ) Delete
Name: RYAN, JOHN M
Address: 2502 NORTH ROCKY POINT DRIVE SUITE 1050
City-St-Zip: TAMPA, FL 33607

Title: DT ( ) Delete
Name: LAWSON, MICHAEL
Address: 2502 NORTH ROCKY POINT DRIVE SUITE 1050
City-St-Zip: TAMPA, FL 33607

Title: DS ( ) Delete
Name: GARDNER, JACQUELINE
Address: 2502 NORTH ROCKY POINT DRIVE SUITE 1050
City-St-Zip: TAMPA, FL 33607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DS (X) Change ( ) Addition
Name: SINGLETON, GREG
Address: 2502 NORTH ROCKY POINT DRIVE SUITE 1050
City-St-Zip: TAMPA, FL 33607

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: JOHN RYAN P 04/30/2007

Electronic Signature of Signing Officer or Director — Date