

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07205

FILED
Apr 01, 2008
Secretary of State

Entity Name: SPANISH LAKES PARK HOME OWNERS OF NOKOMIS, INC.

Current Principal Place of Business:

1340 N TAMiami TRAIL
C/O LARRY TINSLEY
NOKOMIS, FL 34275 US

New Principal Place of Business:

Current Mailing Address:

20 BOCA CIEGA
C/O LARRY TINSLEY
NOKOMIS, FL 34275 US

New Mailing Address:

FEI Number: 59-2645328

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FISH, PAUL
9 BOCA CIEGA
NOKOMIS, FL 34275 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: D () Delete
Name: KING, JAMES
Address: 190 SPANISH LAKES DR
City-St-Zip: NOKOMIS, FL 34275

Title: D () Delete
Name: MCCONVILLA, DON
Address: 102 CAPTIVA
City-St-Zip: NOKOMIS, FL 34275

Title: P () Delete
Name: TINSLEY, LARRY
Address: 20 BOCA CIEGA
City-St-Zip: NOKOMIS, FL 34275

Title: V () Delete
Name: NOLAN, CLAIRE
Address: 76 LA COSTA
City-St-Zip: NOKOMIS, FL 34275

Title: T () Delete
Name: FISH, PAUL
Address: 9 BOCA CIEGA
City-St-Zip: NOKOMIS, FL 34275

Title: S () Delete
Name: KOSLOWSKI, PERRY
Address: 117 BOCA CIEGA
City-St-Zip: NOKOMIS, FL 34275

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
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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: LARRY TINSLEY

P

04/01/2008

Electronic Signature of Signing Officer or Director

Date