

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 26, 2006 8:00 am
Secretary of State

04-26-2006 90187 011 ****70.00

DOCUMENT # N07373

1. Entity Name

**SPANISH AMERICAN CLUB OF SILVER SPRINGS
SHORES, INC.**



Principal Place of Business

P O BOX 830104
OCALA FL 34483-0104

Mailing Address

P O BOX 830104
OCALA FL 34483-0104

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**DRUET, CARLOS
461 SPRING LANE
OCALA FL 34472**

7. Name and Address of New Registered Agent

Name **ROSALBA - ROBLES**

Street Address (P.O. Box Number is Not Acceptable)

441 WATER - RD.

City **OCALA**

FL

Zip Code

34472

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 the obligations of registered agent.

SIGNATURE **ROSALBA - ROBLES**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

April 17, 2006

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☒ Delete
NAME **DRUET, CARLOS**
STREET ADDRESS **461 SPRING LANE**
CITY-ST-ZIP **OCALA FL 34472**

TITLE **VD** ☒ Delete
NAME **VARGAS, CARMEN IRIS**
STREET ADDRESS **329 OAK TRACK**
CITY-ST-ZIP **OCALA FL 34472**

TITLE **SD** ☒ Delete
NAME **ALMEIDA, VILMA**
STREET ADDRESS **2601 SW 10TH STREET, APT. #350**
CITY-ST-ZIP **OCALA FL 34474**

TITLE **TD** ☐ Delete
NAME **ROSE, MORALES**
STREET ADDRESS **5984 S.E. 88TH STREET**
CITY-ST-ZIP **OCALA FL 34472**

TITLE **FD** ☒ Delete
NAME **PALERMO, ANGEL**
STREET ADDRESS **9430 SE 110 STREET RD.**
CITY-ST-ZIP **BELLEVUE FL 34420**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **ROSALBA - ROBLES** ☐ Change ☒ Addition
NAME
STREET ADDRESS **441 WATER - RD.**
CITY-ST-ZIP **OCALA - FL. 34472**

TITLE **CARLOS - DRUET** ☐ Change ☒ Addition
NAME
STREET ADDRESS **461 SPRING - LANE**
CITY-ST-ZIP **OCALA - FL. 34472**

TITLE **MIRALBA-ORTEGA-YERTY** ☐ Change ☒ Addition
NAME
STREET ADDRESS **317 BAHIA-TRACK**
CITY-ST-ZIP **OCALA - FL. 34472**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VICTOR - AYALA** ☐ Change ☒ Addition
NAME
STREET ADDRESS **8 PALM - RD.**
CITY-ST-ZIP **OCALA - FL. 34472**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

SIGNATURE: **ROSALBA - ROBLES**

April 17, 2006