2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2008
Secretary of State

DOCUMENT# N09826

Entity Name: SPRING RUN PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

10294 W MONTYCE CT
CRYSTAL RIVER, FL 34428 US

New Principal Place of Business:

10220 PAMONDEHO CIRCLE
CRYSTAL RIVER, FL 34428 US

Current Mailing Address:

PO BOX 2631
CRYSTAL RIVER, FL 34423 US

New Mailing Address:

FEI Number: 59-2848934 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEASON, BRUCE A
10294 W MONTYCE CT
CRYSTAL RIVER, FL 34428 US

Name and Address of New Registered Agent:

MCCARTHY, BETH E
10220 W. PAMONDEHO CIRCLE
CRYSTAL RIVER, FL 34428 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: BETH E. MCCARTHY 01/28/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: S ( ) Delete
Name: LEASON, BRUCE A
Address: 10294 W MONTYCE CT
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: D ( ) Delete
Name: FOSTER, JOHN
Address: 10095 W PAMONDEHO CIR
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: D ( ) Delete
Name: VANN, DONNA
Address: 10190 PAMONDEHO CR
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: P ( ) Delete
Name: RODE, MARY JO
Address: 10190 PAMONDEHO CIRCLE
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: T ( ) Delete
Name: RONDEAU, ROBERT
Address: 10163 W PAMONDEHO CIR
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: V ( ) Delete
Name: PRAET, DAVE
Address: 925 MCCLEARY STREET
City-St-Zip: DELRAY BEACH, FL 33483

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change ( ) Addition
Name: MCCARTHY, BETH E
Address: 10220 W. PAMONDEHO CIRCLE
City-St-Zip: CRYSTAL RIVER, FL 34428

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: ROBERT RONDEAU T/D 01/28/2008
Electronic Signature of Signing Officer or Director Date