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CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 14 AM 9:16

DOCUMENT # N13621 (0)

1. Corporation Name

SPRING LAKE PROPERTY ASSOCIATION, INC.

Principal Place of Business	Mailing Address
6110 US HWY 98 SEBRING FL 33870	6110 US HWY 98 SEBRING FL 33870

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/28/1986
3a. Date of Last Report: 04/11/1994
4. FEI Number: 59-2666676 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required
8. *This corporation has liability for intangible tax under S. 199.032, Florida Statutes* ☒ Yes ☐ No

2. Principal Place of Business (21): Suite, Apt. #, etc. (22): City & State (23): Zip (24): Country (25)

2a. Mailing Address (26): Suite, Apt. #, etc. (27): City & State (28): Zip (29): Country (30)

9. Name and Address of Current Registered Agent

LENK, BERNARD
7416 ROLLING HILLS ROAD
SEBRING FL 33870

10. Name and Address of New Registered Agent

81 Name: Roy Schellenger
82 Street Address (P.O. Box Number is Not Acceptable): 701 Holly Drive
83:
84 City: Sebring, FL 85 Zip Code: 33870

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Roy Schellenger ✓ DATE: 4/10/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE	PD	☒ Change ☐ Addition
NAME	LENK, BERNARD	1.2 NAME	Schellenger, Roy	
STREET ADDRESS	7416 ROLLING HILLS	1.3 STREET ADDRESS	701 Holly Drive	
CITY-ST-ZIP	SEBRING FL	1.4 CITY-ST-ZIP	Sebring, FL 33870	
TITLE	FVPD	2.1 TITLE		☐ Change ☐ Addition
NAME	EMERSON, ROBERT	2.2 NAME		
STREET ADDRESS	7433 HONEYSUCKLE DRIVE	2.3 STREET ADDRESS		
CITY-ST-ZIP	SEBRING FL	2.4 CITY-ST-ZIP		
TITLE	SVPD	3.1 TITLE		☒ Change ☐ Addition
NAME	GARDNER, JACK	3.2 NAME		
STREET ADDRESS	324 SPRING LAKE BLVD.	3.3 STREET ADDRESS	OFFICE NOT FILLED	
CITY-ST-ZIP	SEBRING FL	3.4 CITY-ST-ZIP		
TITLE	SD	4.1 TITLE	SD	☒ Change ☐ Addition
NAME	THOMPSON, CATHERINE	4.2 NAME	Sunman, Janet	
STREET ADDRESS	501 RYAN RD.	4.3 STREET ADDRESS	6217 Cypress Lane	
CITY-ST-ZIP	SEBRING FL	4.4 CITY-ST-ZIP	Sebring, FL 33870	
TITLE	TD	5.1 TITLE	TD	☒ Change ☐ Addition
NAME	HANSEN, ROGER	5.2 NAME	Fogle, Donald	
STREET ADDRESS	7424 ROLLING HILLS ROAD	5.3 STREET ADDRESS	333 Oak Knolls Circle	
CITY-ST-ZIP	SEBRING FL	5.4 CITY-ST-ZIP	Sebring, FL 33870	
TITLE	D	6.1 TITLE		☐ Change ☐ Addition
NAME	HANCOCK, CARL	6.2 NAME		
STREET ADDRESS	6233 THOMAS TERR	6.3 STREET ADDRESS		
CITY-ST-ZIP	SEBRING FL	6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Roy Schellenger Roy Schellenger 3/28/95 (813) 655-2230
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

6044H4