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Mar 27 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N13621 (0)

1. Corporation Name

SPRING LAKE PROPERTY ASSOCIATION, INC.

Principal Place of Business

6110 US HWY 98
SEBRING FL 33870

Mailing Address

6110 US HWY 98
SEBRING FL 33870-9710

3. Date Incorporated or Qualified
02/28/1986

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

4. FEI Number

59-2666676

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FOREMAN, JOHN F., JR.
532 LIN ROAD
SEBRING FL 33870

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: John F. Foreman, Jr., Pres.

March 24, 1997

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

(NOTE: Registered Agent signature required when reinstalling)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME FOREMAN, JOHN F., JR.
STREET ADDRESS 532 LIN ROAD
CITY-ST-ZIP SEBRING FL 33870

TITLE FVPD ☐ DELETE

NAME PORTER, RAYMOND A.
STREET ADDRESS 801 HOLLY DR.
CITY-ST-ZIP SEBRING FL 33870

TITLE SD ☐ DELETE

NAME SUNMAN JANET
STREET ADDRESS 6217 CYPRESS LANE
CITY-ST-ZIP SEBRING FL

TITLE TD ☐ DELETE

NAME FOGLE, DONALD
STREET ADDRESS 333 OAK KNOLLS CIRCLE
CITY-ST-ZIP SEBRING FL

TITLE D ☐ DELETE

NAME EMERSON, ROBERT C.
STREET ADDRESS 7433 HONEYSUCKLE DR.
CITY-ST-ZIP SEBRING FL 33870

TITLE ☐ DELETE

NAME
STREET ADDRESS

CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: John F. Foreman, Jr. 3/24/97 (941) 655-2230

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0054271

CR2E037 (9/96)