

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N13621

1. Entity 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

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2666676

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HANCOCK, CARL S  
6233 THOMAS TERR  
SEBRING FL 33870

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete  
NAME HANCOCK, CARL S  
STREET ADDRESS 6233 THOMAS TERR  
CITY-ST-ZIP SEBRING FL 33870

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

TITLE SD ☒ Delete  
NAME DANFORTH, RICHARD H  
STREET ADDRESS 417 ORANGE CT  
CITY-ST-ZIP SEBRING FL 33870

TITLE SD ☐ Change ☒ Addition  
NAME William Dauber  
STREET ADDRESS 7017 Spring Hill Rd  
CITY-ST-ZIP Sebring, FL 33870

TITLE SVPD ☒ Delete  
NAME ROLAND, KELLY J  
STREET ADDRESS 324 ARROWHEAD DR  
CITY-ST-ZIP SEBRING FL 33870

TITLE SVPD ☐ Change ☒ Addition  
NAME Robert Gaumer  
STREET ADDRESS 5825 Redwood Terr  
CITY-ST-ZIP Sebring, FL 33870

TITLE TD ☐ Delete  
NAME WOLFE, KAREN  
STREET ADDRESS 8124 HAMPSHIRE DRIVE  
CITY-ST-ZIP SEBRING FL 33870

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

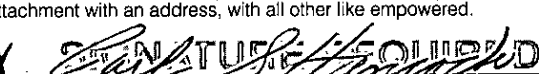
TITLE FVPD ☒ Delete  
NAME FOREMAN, JOHN F JR  
STREET ADDRESS 532 LIN ROAD  
CITY-ST-ZIP SEBRING FL 33870

TITLE FVPD ☐ Change ☒ Addition  
NAME Richard H. Danforth  
STREET ADDRESS 417 Orange Ct  
CITY-ST-ZIP Sebring, FL 33870

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 exemption stated in Section 119.07(3)(i), 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:  Carl S. Hancock 3/27/00 (863) 655-2230

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #



DO NOT WRITE IN THIS SPACE

03/27/00