2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13621

FILED Mar 03, 2009 Secretary of State

Entity Name: SPRING LAKE PROPERTY ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

6122 US HWY 98 EAST SEBRING, FL 338769710

Current Mailing Address: New Mailing Address:

6122 US HWY 98 EAST SEBRING, FL 338769710

FEI Number: 59-2666676 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WOLFE, WALTER E 6122 US HWY 98 E SEBRING, FL 33876 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition SNYDER, DANIEL DANDENEAU, KENNETH Name: Name: 542 LIN RD Address: 707 GLEN MAR CT. Address:

City-St-Zip: SEBRING, FL 33870 City-St-Zip: SEBRING, FL 33876

Title: Title: (X) Change () Addition () Delete ROBERTS, WAYNE 1ST Name: SCHROEDER, JOHN 1ST Name: Address: 6801 CORAL RIDGE RD Address: 6801 CORAL RIDGE RD City-St-Zip: SEBRING, FL 33876 City-St-Zip: SEBRING, FL 33876

Title: () Delete Title: **VPD** (X) Change () Addition

DANDENEAUI, KENNETH 2ND DAFFNER, LINDA 2ND Name: Name: Address: 709 GLEN MAR CT Address: 5821 THUNDER RD. City-St-Zip: SEBRING, FL 33876 City-St-Zip: SEBRING, FL 33876

() Delete Title: SD Title: () Change () Addition

Name: MAYS, TONYA Name: 1009 DUANE PALMER BLVD Address: Address: City-St-Zip: SEBRING, FL 338766428 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

FURR, JANET CHARLEYNE, UZNANSKI Name: Name: 601 SPRING LAKE RD 525 HOLLY DRIVE Address: Address: SEBRING, FL 33876 City-St-Zip: City-St-Zip: SEBRING, FL 33876

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: KENNETH DANDENEAU PD 03/03/2009