

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31241

FILED  
Apr 27, 2006  
Secretary of State

**Entity Name:** SPORTSMAN'S PARADISE EAST ACRES PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

7111 LADY HAWK LANE  
TALLAHASSEE, FL 32309 US

**New Principal Place of Business:**

**Current Mailing Address:**

7111 LADY HAWK LANE  
TALLAHASSEE, FL 32309 US

**New Mailing Address:**

**FEI Number:** 04-1302695

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JOHNSON, STEPHANIE T  
12732 LATE AUTUMN LANE  
TALLAHASSEE, FL 32309 US

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

JOHNSON, STEPHANIE P  
12732 LATE AUTUMN LANE  
TALLAHASSEE, FL 32309 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: STEPHANIE JOHNSON

04/27/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: WEEKS, JENNIFER  
Address: 7013 BUCKSKIN ROAD  
City-St-Zip: TALLAHASSEE, FL 32309

Title: VP ( ) Delete  
Name: MCKIERNAN, KIM  
Address: 12724 LATE AUTUMN LANE  
City-St-Zip: TALLAHASSEE, FL 32309

Title: T ( ) Delete  
Name: JOHNSON, STEPHANIE  
Address: 12732 LATE AUTUMN LANE  
City-St-Zip: TALLAHASSEE, FL 32309

Title: S ( ) Delete  
Name: JOHNSON, STEPHANIE  
Address: 12732 LATE AUTUMN LANE  
City-St-Zip: TALLAHASSEE, FL 32309

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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: STEPHANIE JOHNSON

T/S

04/27/2006

Electronic Signature of Signing Officer or Director

Date