

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33086

FILED
Jun 16, 2009
Secretary of State

Entity Name: THE SPRINGS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1005 CLEARCREEK DRIVE
TAMPA, FL 33613

New Principal Place of Business:

Current Mailing Address:

1005 CLEARCREEK DRIVE
TAMPA, FL 33613

New Mailing Address:

FEI Number: 59-3022277 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WALTERS, KRISTEN
1005 CLEARCREEK DRIVE
TAMPA, FL 33613 US

Name and Address of New Registered Agent:

TANKEL, ROBERT PA
1022 MAIN STREET
SUITE D
DUNEDIN, FL 34698 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: ROBERT TANKEL

06/16/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MANDIA, VICTOR
Address: 919 CLEARCREEK DRIVE
City-St-Zip: TAMPA, FL 33613

Title: VD () Delete
Name: TURNER, DARRELL
Address: 917 CLEARCREEK DRIVE
City-St-Zip: TAMPA, FL 33613

Title: STD () Delete
Name: WALTERS, KRISTEN
Address: 1005 CLEARCREEK DR
City-St-Zip: TAMPA, FL 33613

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SAULTER, DAVID
Address: 1006 CLEARCREEK DRIVE
City-St-Zip: TAMPA, FL 33613

Title: VD (X) Change () Addition
Name: BARR, SCOTT
Address: 14306 HOMOSASSA STREET
City-St-Zip: TAMPA, FL 33613

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: KRISTEN WALTERS

STD

06/16/2009

Electronic Signature of Signing Officer or Director

Date