


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 25, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N35487</b>	
1. Entity Name GLEN EAGLES AT SPRUCE CREEK HOMEOWNERS ASSOCIATION, INC.	

Principal Place of Business 2041 KING AIR CT DAYTONA BEACH, FL 32128 US	Mailing Address 2041 KING AIR CT DAYTONA BEACH, FL 32128 US
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**DO NOT WRITE IN THIS SPACE**



02262008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2980947	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

BALTZ, ALAN  
 2041 KING AIR CT  
 DAYTONA BEACH, FL 32128

**DO NOT WRITE IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)

**Filing Fee is \$61.25**  
**Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AXINN, JOAN 2078 COUNTRY CLUB DR. DAYTONA BEACH, FL 32128
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D KURRLE, ROBERT 1780 ROSCOE TURNER TRAIL DAYTONA BEACH, FL 32128
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D BALTZ, ALAN 2041 KING AIR COURT DAYTONA BEACH, FL 32128
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D SIMPSON, GEORGE 1925 CANADAIR CT DAYTONA BEACH, FL 32128
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D BOTTOMS, ALICE 1913 CANADAIR CT DAYTONA BEACH, FL 32128
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000836969  
 03/04/08-80037-025 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Alan J. Baltz 2/26/08 386/377-4884  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #