2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36590

FILED Jan 25, 2009 Secretary of State

Entity Name: THE SPICEWOOD HOMEOWNERS ASSOCIATION, INC. **New Principal Place of Business: Current Principal Place of Business:** 1736 CINNAMON CIRCLE CASSELBERRY, FL 32707 US **Current Mailing Address: New Mailing Address:** 1736 CINNAMON CIRCLE CASSELBERRY, FL 32707 US FEI Number: 59-2869952 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: HOISINGTON, LIN HOISINGTON, LIN TREASUR 1736 CINNAMON CIRCLE 1736 CINNAMON CIRCLE CASSELBERRY, FL 32707 US CASSELBERRY, FL 32707 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: LIN HOISINGTON 01/25/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete HOISINGTON, LIN Name: Name: Address: 1736 CINNAMON CIRCLE Address: City-St-Zip: CASSELBERRY, FL 32707 City-St-Zip: Title: () Delete Title: () Change () Addition Name: LEVINE, BETSY Name: Address: 1696 SPICEWOOD LANE Address: City-St-Zip: CASSELBERRY, FL 32707 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: LIN HOISINGTON TREA 01/25/2009