2000 UNIFORM BUSINESS REPORT (UBR)

OCUMENT # N37496 Entity Name SPRING HILL MOBILE HOME OWNER'S ASSOCIATION, INC Flace of Business Mailing Address

FILED Feb 04, 2000 8:00 am Secretary of State

02-04-2000 90078 031 ****61.25

Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For Not Applicable Space Sp	WINDSOR LANE FL 33860 Principal Place of Business Suite, Apt. #, etc.		185 IMPERIAL DR. N MULBERRY FL 33880-9088					y	130	20		
Sure, Apt. #. etc. Sure, Apt. #. etc. Sure, Apt. #. etc. DO NOT WRITE IN THIS SPACE			3. Mailing Address 92 Windson Lane		ne							
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6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 8. Street Address (P.O. Box Number is Not Acceptable) Cay FL Zip Code 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. FFLE NOW: FEE IS \$61.25 POWNEY, FAYE 155 SABEL LANE 155 SABEL LANE 155 SABEL LANE 155 SABEL LANE 156 SABEL LANE 157 Debte 151 Debte 151 Debte 151 Debte 152 MULBERRY FL 33860 DT 112 NAME 155 SABEL LANE 156 SABEL LANE 157 Debte 157 Debte 158 SABEL LANE 159 SABEL LANE 159 SCHNEDER, ROBERT J 119 ACREA OR 110 Debte 111 NAME 115 SABEL LANE 116 SABLE LANE 117 SABO 117 SABO 118 SABEL LANE 119 SABEL LANE 110 SABLE LANE 110 SABLE LANE 115 SABEL LANE 116 SABLE LANE 117 SABO 117 SABO 118 SABEL LANE 118 SABEL LANE 119 SABEL LANE 118 SABEL LANE 119 SABEL LANE 118 SABEL LANE 118 SABEL LANE 119 SABEL LANE 118 SABEL LANE 119 SABEL LANE 110 SABLE LANE 110	City & State			FL	4. FEI Nu		^{per} 59-3020304					
Name	Zip	Country	33860	Country USA		5. Certificate o	f Status Desired					
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FILE NOW: FEE IS \$61.25		-										
FEE IS \$61.25		Signature, typed or printed name of registered agen	nt and title if applicable (NOTE: Re-	gistered Agent signati	ure required w	hen reinstating)		DATE			{	
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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.