## 2005 NOT-FOR-PROFIT CORPORATION

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

## FILED **ANNUAL REPORT** Jan 20, 2005 08:00 AM **DOCUMENT # N40253 Secretary of State** 1. Entity Name SPENGER SUBDIVISION PROPERTY OWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address 3591 MCCOMB LANE 3591 MCCOMB LANE BONITA SPRINGS, FL 34134 BONITA SPRINGS, FL 34134 US 01112005 No Chg-NP CR2E037 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0311053 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BRADELY, SMITH R DO NOT WRITE 27657 OLD 41 RD BONITA SPRINGS, FL 34135 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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Filing Fee is \$61.25 П Trust Fund Contribution. Added to Fees Due by May 1, 2005 OFFICERS AND DIRECTORS 10. 100000186143 01/21/05-80044-013 61.25 TITLE PTD NAME SPENGER, J. PETER STREET ADDRESS 3591 MCCOMB LANE CITY-ST-ZIP BONITA SPRINGS, FL 34134 TITLE NAME SPENGER, HANNELORE STREET ADDRESS 3591 MCCOMB LANE CITY-ST-ZIP BONITA SPRINGS, FL 34134 TITE F NAME MEHRBRODT, WERNER STREET ADDRESS 3561 MCCOMB LANE DO NOT WRITE CITY-ST-ZIP BONITA SPRINGS, FL 34134 IN THIS SPACE TITLE 结构群 STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SPENGER HANNELDRE **SIGNATURE**