2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40253

FILED Jan 10, 2009 Secretary of State

Entity Name: SPENGER SUBDIVISION PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:			iness:	New Principal Place	New Principal Place of Business:	
	COMB LANE PRINGS, FL 3	34134	US			
Current Mailing Address:				New Mailing Address:		
	OMB LANE PRINGS, FL 3	34134	US			
FEI Number	: 65-0311053	FEI Nu	ımber Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Registered Agent:	Name and Address	Name and Address of New Registered Agent:	
	DRE, SPENGE	R.				
BONITA S	OMB LN PRINGS, FL 3 named entity:		US this statement for the	purpose of changing its register	ed office or registered agent, or both,	
BONITA S The above	PRINGS, FL 3			purpose of changing its register	ed office or registered agent, or both,	
BONITA S The above	PRINGS, FL 3 named entity: of Florida. RE:	submits	this statement for the			
BONITA S The above in the State SIGNATUI	PRINGS, FL 3 named entity: of Florida. RE:	submits		ent	ed office or registered agent, or both, Date DES TO OFFICERS AND DIRECTOR:	
BONITA S The above in the State SIGNATUI	PRINGS, FL 3 named entity and of Florida. RE: Electron S AND DIREC	submits nic Signa TORS:) Delete PETER 3 LANE	this statement for the	ent	Date	
BONITA S The above in the State SIGNATUI OFFICER: Value:	PRINGS, FL 3 e named entity e of Florida. RE: Electror S AND DIREC PTD () SPENGER, J. F 3591 MCCOME BONITA SPRIN	submits nic Signa FTORS:) Delete PETER 3 LANE IGS, FL 3) Delete NNELORE 3 LANE	this statement for the ature of Registered Ag	ent ADDITIONS/CHANG Title: Name: Address:	Date BES TO OFFICERS AND DIRECTOR	

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: HANNELORE SPENGER VSD 01/10/2009