2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Jan 23, 2006 08:00 AN DOCUMENT # N43741 Secretary of State 1. Entity Name SUN SPRINGS PROPERTY ASSOCIATION, INC. Principal Place of Business Mailing Address 27503 NW 86TH AVENUE 27503 NW 86TH AVENUE HIGH SPRINGS FL 32643 HIGH SPRINGS FL 32643 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State Applied For NO-T APPLICABLE Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RICHARDSON, B.E. Street Address (P.O. Box Number is Not Acceptable) 27503 NW 86TH AVE HIGH SPRINGS FL 32643 City Zip Code 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 Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 \$5.00 May Be 9. Election Campaign Financing Make Check Payable to Trust Fund Contribution. Due By May 1, 2006 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ☐ Delete TITLE TITLE RICHARDSON, B. E. NAME 27503 NW 86TH AVENUE STREET ADDRESS STREET ADDRESS HIGH SPRINGS FL 32643 CITY-ST-ZIP CITY-ST-ZIP <u>U</u>00000395867 □ Change PRES Delete ☐ Additio TITLE ROBERTS, GERALD 01/27/06-80008-022 61.25 27503 N.W. 86TH AVE. STREET ADDRESS STREET ADDRESS HIGH SPRINGS FL 32643 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete ☐ Change MAME ROBERTS, JULIE NAME STREET ADDRESS 27503 N.W 86TH AVE. STREET ADDRESS HIGH SPRINGS FL 32643 CITY-ST-7IP CITY - ST - ZIP ۷P Addish ☐ Delete TITLE ☐ Change TITLE NAME LOCHLER, GLEN NAME 27503 N.W. 86TH AVE. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HIGH SPRINGS FL 32643 CITY-ST-ZIP TRUS Delete ☐ Change Addition TITLE HOLDER, DONAL NAME NAME 29 SW 76TH COURT STREET ADDRESS STREET ADDRESS BELL FL 32619 CITY - ST - ZIP CITY-ST-2IP TRUS TITLE ☐ Delete TITLE Change ☐ Addiii MARTIN, DOROTHY NAME 2280 S.W. 74TH COURT STREET ADDRESS STREET ADDRESS **BELL FL 32619** CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 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 cath; 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 fike empowered.

SIGNATURE:

B. E. Nil wordson

1-20-06