## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N46212

FILED Mar 18, 2009 Secretary of State

Entity Name: BLUE SPRING LANDING HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

220 WHITE DOVE AVE 220 WHITE DOVE AVE

ORANGE CITY, FL 32763 ORANGE CITY, FL 32763 US

Current Mailing Address: New Mailing Address:

220 WHITE DOVE AVE 220 WHITE DOVE AVE

ORANGE CITY, FL 32763 ORANGE CITY, FL 32763 US

FEI Number: 59-3109503 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:

WERBLO, CIJA M
220 WHITE DOVE AVE
ORANGE CITY, FL 32763 US

WERBLO, CIJA M
220 WHITE DOVE AVE
ORANGE CITY, FL 32763 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: CIJA M. WERBLO 03/18/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: P ( ) Delete Title: P (X) Change ( ) Addition

Name:LUNT, LOUISAName:LUNT, LOUISAAddress:230 WHITE DOVE AVEAddress:230 WHITE DOVE AVECity-St-Zip:ORANGE CITY, FL 32763City-St-Zip:ORANGE CITY, FL 32763 US

Title: VPE ( ) Delete Title: VPE (X) Change ( ) Addition

 Name:
 WERBLO, RICHARD
 Name:
 WERBLO, RICHARD

 Address:
 220 WHITE DOVE AVE
 Address:
 220 WHITE DOVE AVE

 City-St-Zip:
 ORANGE CITY, FL 32763
 City-St-Zip:
 ORANGE CITY, FL 32763 US

Title: S () Delete Title: S (X) Change () Addition

 Name:
 TWITTY, PAULA
 Name:
 TWITTY, PAULA

 Address:
 200 WHITE DOVE AVE
 Address:
 200 WHITE DOVE AVE

 City-St-Zip:
 ORANGE CITY, FL 32763
 City-St-Zip:
 ORANGE CITY, FL 32763 US

 Name:
 WERBLO, CIJA
 Name:
 WERBLO, CIJA

 Address:
 220 WHITE DOVE AVE
 Address:
 220 WHITE DOVE AVE

 City-St-Zip:
 ORANGE CITY, FL 32763
 City-St-Zip:
 ORANGE CITY, FL 32763 US

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: CIJA M. WERBLO T 03/18/2009