

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 24, 2006 08:00 AM
Secretary of State

DOCUMENT # N93000005248

1. Entity Name
LITTLE SPRING LAKE ASSOCIATION, INC.



Principal Place of Business
**36236 MARY ELLEN ST
FRUITLAND PARK, FL 34731**

Mailing Address
**36236 MARY ELLEN ST
FRUITLAND PARK, FL 34731**



07172006 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3210752

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**COOK, EMORY
1107 W NORTH BLVD
LEESBURG, FL 34748**

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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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U000000572230
07/25/06-80020-021 61.25

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	PATTERSON, JOHN A.
STREET ADDRESS	36236 MARY ELLEN ST.
CITY-ST-ZIP	FRUITLAND PK, FL 34731
TITLE	D
NAME	COOK, EMORY
STREET ADDRESS	36309 W. SPRING LAKE BLVD.
CITY-ST-ZIP	FRUITLAND PK, FL 34731
TITLE	D
NAME	LONG, RONALD E.
STREET ADDRESS	01916 SPRING LAKE RD.
CITY-ST-ZIP	FRUITLAND PK, FL 34731
TITLE	D
NAME	COOK, MELANIE
STREET ADDRESS	36309 W. SPRING LAKE BLVD.
CITY-ST-ZIP	FRUITLAND PK, FL 34731
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE: John A. Patterson John A. Patterson 7-17-06 352-408-8163
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #