

FILE NOW: FILING FEE IS \$61.25

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May 05 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N94000002248 (2)**

1. Corporation Name

SPRING HILL SPORTS ASSOCIATION, INC.



Principal Place of Business 6354 CRANBROOK CT. SPRING HILL FL 34806		Mailing Address 6354 CRANBROOK CT. SPRING HILL FL 34806		3. Date Incorporated or Qualified 05/05/1994	
2. Principal Place of Business 21 7271 Springhill DR		2a. Mailing Address 25 7271 Springhill DR		4. FEI Number 59-3240706	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
22 City & State 23 Spring hill 71		27 City & State 28 Spring hill		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
24 Zip 34606		29 Zip 34606		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Country 25 Hernado		Country 30 Hernado		7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No				9. Name and Address of Current Registered Agent DEFRANCESCO, WAHNTA 6354 CRANBROOK CT. SPRING HILL FL 34806	
10. Name and Address of New Registered Agent 81 Name David A Ellison 82 Street Address (P.O. Box Number is Not Acceptable) 7271 Springhill DR 83 84 City Spring hill FL 85 Zip Code 34606					

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE **David A Ellison** **David A Ellison** **4-27-98**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE DP	DEFRANCESCO, WAHNTA <input checked="" type="checkbox"/> DELETE	1.1 TITLE President DP/M <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME C/O 6354 CRANBROOK CT.		1.2 NAME David A Ellison	
STREET ADDRESS SPRING HILL FL 34806		1.3 STREET ADDRESS 7271 Springhill DR	
CITY-ST-ZIP		1.4 CITY-ST-ZIP Spring hill 71 34606	
TITLE DV	WALKER, DEBBIE <input checked="" type="checkbox"/> DELETE	2.1 TITLE DV <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME 7317 BERWICK WAY		2.2 NAME Janna Blankenship	
STREET ADDRESS BROOKSVILLE FL		2.3 STREET ADDRESS 9387 miracle DR	
CITY-ST-ZIP		2.4 CITY-ST-ZIP Spring hill 71 34608	
TITLE DS	PERKINS, VIVIAN <input checked="" type="checkbox"/> DELETE	3.1 TITLE Sec DS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME 11058 BAYLOR DR		3.2 NAME Cindy Panico	
STREET ADDRESS SPRING HILL FL		3.3 STREET ADDRESS 12301 Rockdick ave	
CITY-ST-ZIP		3.4 CITY-ST-ZIP BROOKSVILLE 71 34614	
TITLE DT	BERRY, TONI <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME 3374 DOTHAN AVE		4.2 NAME	
STREET ADDRESS SPRING HILL FL		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **David A Ellison** **David A Ellison** **4-27-98** **352-664-1677**

CR2E037 (10/97)