

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

**FILED**  
**Feb 16, 2006 8:00 am**  
**Secretary of State**

02-16-2006 90044 048 \*\*\*\*61.25

DOCUMENT # N96000002124

1. Entity Name

SPRING HOUSE INSTITUTE, INC.



Principal Place of Business

3117 OKEEHEEPKEE RD.  
TALLAHASSEE FL 32303

Mailing Address

PO BOX 10146  
TALLAHASSEE FL 32302



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VAN BRUNT LEWIS, CLIFTON  
3117 OKEEHEEPKEE RD.  
TALLAHASSEE FL 32303

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☒

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete  
NAME LEWIS, CLIFTON V  
STREET ADDRESS 3117 OKEEHEEPKEE RD.  
CITY-ST-ZIP TALLAHASSEE FL 32303

TITLE VPD ☐ Delete  
NAME POSNER, PATRICIA P ESQ.  
STREET ADDRESS 310 N JEFFERSON ST  
CITY-ST-ZIP TALLAHASSEE FL 32301

TITLE STD ☐ Delete  
NAME RUDLOE, ANNE PH.D.  
STREET ADDRESS 151 CLARK DRIVE  
CITY-ST-ZIP PANACEA FL 32346

TITLE EVP ☐ Delete  
NAME MASHBURN, BYRD LEWIS  
STREET ADDRESS 3117 OKEEHEEPKEE ROAD  
CITY-ST-ZIP TALLAHASSEE FL 32303

TITLE BC ☐ Delete  
NAME LEWIS, GEORGE III  
STREET ADDRESS 3117 OKEEHEEPKEE RD  
CITY-ST-ZIP TALLAHASSEE FL 32303

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing 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 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: Clifton V. B. Lewis Clifton V B Lewis 850-562-1835