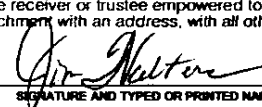


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90462 040 ****61.25

DOCUMENT # N96000003860					
1. Entity Name SPRINGFIELD HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 3298 SUMMIT BLVD., STE 4 PENSACOLA, FL 32503			Mailing Address 3298 SUMMIT BLVD., STE 4 PENSACOLA, FL 32503		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-3425292	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ETHERIDGE, RAY O 3298 SUMMIT BLVD STE 4 PENSACOLA, FL 32503			7. Name and Address of New Registered Agent 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 reissuing) DATE					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE STD NAME CALDWELL, TOM STREET ADDRESS 3298 SUMMIT BLVD SUITE 18 CITY-ST-ZIP PENSACOLA, FL 32503	☒ Delete				
TITLE PD NAME SABA, MICHAEL STREET ADDRESS 3298 SUMMIT BLVD STE 18 CITY-ST-ZIP PENSACOLA, FL 32503	☒ Delete				
TITLE VPD NAME FRANZ, JON STREET ADDRESS 3298 SUMMIT BLVD STE #18 CITY-ST-ZIP PENSACOLA, FL 32503	☒ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Delete				
TITLE P.D. NAME Walter, Jim STREET ADDRESS 1116 Burnhill Circle CITY-ST-ZIP Pensacola, FL 32526	☐ Change ☒ Addition				
TITLE VPD NAME Mazo, Cathy STREET ADDRESS 4010 Glenway Dr CITY-ST-ZIP Pensacola, FL 32526	☐ Change ☒ Addition				
TITLE SD NAME Jabut, Aaron STREET ADDRESS 3103 Flintlock Dr. CITY-ST-ZIP Pensacola, FL 32526	☐ Change ☒ Addition				
TITLE TD NAME DeQuits, Debbie STREET ADDRESS 4003 Glenway Dr. CITY-ST-ZIP Pensacola, FL 32526	☐ Change ☒ Addition				
TITLE D NAME Kaliker, Tom STREET ADDRESS 4056 Glenway Dr. CITY-ST-ZIP Pensacola, FL 32526	☐ Change ☒ Addition				
TITLE P NAME Hackett, Don Jr STREET ADDRESS 3124 Flintlock Dr. CITY-ST-ZIP Pensacola, FL 32526	☐ Change ☐ Addition				
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: 		850 - 4-01-07		434-3585	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	