

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001583

FILED
Apr 10, 2007
Secretary of State

Entity Name: SPRUCE CREEK GOLF & COUNTRY CLUB HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

13601 DEL WEBB BLVD.
SUMMERFIELD, FL 34491 US

New Principal Place of Business:

Current Mailing Address:

8009 S. ORANGE AVENUE
ORLANDO, FL 32809 US

New Mailing Address:

FEI Number: 59-3512649

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LELAND MANAGEMENT, INC.
8009 S. ORANGE AVENUE
ORLANDO, FL 32809 US

Name and Address of New Registered Agent:

LELAND MANAGEMENT, INC.
8009 S. ORANGE AVENUE
ORLANDO, FL 32809 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: _____

04/10/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: RILEY, DON
Address: 13601 DEL WEBB BLVD
City-St-Zip: SUMMERFIELD, FL 34491

Title: DV () Delete
Name: DUNN, BOB
Address: 13601 DEL WEBB BLVD
City-St-Zip: SUMMERFIELD, FL 34491

Title: DS () Delete
Name: STARK, TIM
Address: 13601 DEL WEBB BLVD
City-St-Zip: SUMMERFIELD, FL 34491

Title: DT () Delete
Name: HOUTZ, JIM
Address: 13601 DEL WEBB BLVD
City-St-Zip: SUMMERFIELD, FL 34491

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: DON RILEY

DP

04/10/2007

Electronic Signature of Signing Officer or Director

Date