2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2005
Secretary of State

DOCUMENT# N97000001585

Entity Name: SPRUCE CREEK PRESERVE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

21800 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044 US

New Principal Place of Business:

Current Mailing Address:

21800 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044 US

New Mailing Address:

FEI Number: 59-3512652 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HART, JAMES W JR
SENTRY MANAGEMENT
2180 WEST SR 434 STE 5000
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: HENDRIX, LYNDA L
Address: 14160 SW 111TH CT.
City-St-Zip: DUNNELLON, FL 34432

Title: D ( ) Delete
Name: KEDDIE, GLADYS
Address: 11678 SW 139TH STREET
City-St-Zip: DUNNELLON, FL 34432

Title: SD ( ) Delete
Name: MARIANI, NANCY
Address: 11518 SW 138TH PLACE
City-St-Zip: DUNNELLON, FL 34432

Title: VPD ( ) Delete
Name: LEBIO, RON
Address: 14332 SW 115TH CT
City-St-Zip: DUNNELLON, FL 34432

Title: D ( ) Delete
Name: JOYCE, O.J.
Address: 11299 SW 139TH PLACE
City-St-Zip: DUNNELLON, FL 34432

Title: D ( ) Delete
Name: DUNCKER, WILLIAM L
Address: 13808 SW 114TH CIRCLE
City-St-Zip: DUNNELLON, FL 34432

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: LIOTTA, ROBERT
Address: 14876 SW 112TH CIR
City-St-Zip: DUNNELLON, FL 34432

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 Section 119.07(3)(i), 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: LYNDA L HENDRIX PD 03/28/2005

Electronic Signature of Signing Officer or Director — Date