

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 22, 2007 08:00 AM
Secretary of State

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1. Entity Name
**SPRING ARBOR VILLAGE PROPERTY OWNERS
ASSOCIATION, INC.**

Principal Place of Business
**130 CHERRY BLOSSOM LANE
THE VILLAGES, FL 32159**

Mailing Address
**130 CHERRY BLOSSOM LANE
THE VILLAGES, FL 32159**



01192007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3541028

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**SULLIVAN, SCOTT J
1206 BOWER LANE
THE VILLAGES, FL 32159**

**DO NOT WRITE
IN THIS SPACE**

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

**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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
PARDO, DORIS
1205 LAUREL OAK LANE
THE VILLAGES, FL 32159**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
SULLIVAN, SCOTT
1206 BOWER LANE
THE VILLAGES, FL 32159**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
ROHAN, JOHN
1204 BOWER LANE
THE VILLAGES, FL 32159**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000594860
01/23/07-80015-020 61.25

**DO NOT WRITE
IN THIS SPACE**

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:

[Signature]

1-19-07