

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000002536

FILED
Apr 23, 2002 8:00 AM
Secretary of State

Entity Name: SPRINGVIEW COMMERCIAL OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1855 WEST SR 434
SUITE 284
LONGWOOD, FL 32750

New Principal Place of Business:

805 S. ORLANDO AVE
B
WINTER PARK, FL 32789

Current Mailing Address:

1855 WEST SR 434
SUITE 284
LONGWOOD, FL 32750

New Mailing Address:

805 S. ORLANDO AVE
B
WINTER PARK, FL 32789

FEI Number: 59-3413067

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAY, JOHN C JR
LELAND MANAGEMENT, INC.
1633 E. VINE ST. SUITE 110
KISSIMMEE, FL 34744 US

Name and Address of New Registered Agent:

RASMUSSEN, DAVID
LELAND MANAGEMENT, INC.
1633 E. VINE ST. SUITE 110
KISSIMMEE, FL 34744 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: DAVID RASMUSSEN

04/23/2002

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PVSD () Delete
Name: RASMUSSEN, DAVID R
Address: 1855 WEST SR 434, STE 284
City-St-Zip: LONGWOOD, FL 32750

Title: VSTD () Delete
Name: RASMUSSEN, DAVID R
Address: 36 S U.S. HWY 17-92, SUITE 100
City-St-Zip: DEBARY, FL 32713

Title: D () Delete
Name: ROGERS, RICHARD
Address: 2828 MONTMART DR.
City-St-Zip: ORLANDO, FL 328121030

Title: D (X) Delete
Name: PYLE, ALLEN
Address: 1855 WEST SR 434 #284
City-St-Zip: LONGWOOD, FL 32750

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVSD (X) Change () Addition
Name: RASMUSSEN, DAVID R
Address: 805 S. ORLANDO AVE. B
City-St-Zip: WINTER PARK, FL 32789

Title: D (X) Change () Addition
Name: PYLE, ALLEN
Address: POBOX 0758
City-St-Zip: SANFORD, FL 32772

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: DAVID RASMUSSEN

P

04/23/2002

Electronic Signature of Signing Officer or Director

Date