

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000101444

Entity Name: SPRING ENTERPRISES, INC.

FILED  
Jan 06, 2006  
Secretary of State

## Current Principal Place of Business:

6725 N. HWY US 1  
A  
COCOA, FL 32927

## New Principal Place of Business:

## Current Mailing Address:

6725 N. HWY US 1  
A  
COCOA, FL 32927

## New Mailing Address:

FEI Number: 13-4212243

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

OVERMILLER, ANGEL  
104 RIVERSIDE DR #601  
COCOA, FL 32922 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: OVERMILLER, ANGEL  
Address: 104 RIVERSIDE DR #601  
City-St-Zip: COCOA, FL 32922

Title: VP ( ) Delete  
Name: NOWLIN, MICHAEL A NOWLIN  
Address: 104 RIVERSIDE DR # 601  
City-St-Zip: COCOA, FL 32922

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANGEL OVERMILLER

PRES

01/06/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date