

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 01, 2007 8:00 am
Secretary of State

02-01-2007 90022 014 ***158.75

DOCUMENT # P05000029206

1. Entity Name

SANTA FE PROPERTIES OF ALACHUA, INC.



Principal Place of Business

10 NW 15TH STREET
HIGH SPRINGS FL 32643

Mailing Address

20223 NE 6TH STREET
GAINESVILLE FL 32609



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

10 NW 15th Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

20223 NE 6TH STREET

City & State

City & State

HIGH SPRINGS, FL

Zip

Country

Zip

Country

32653

Alachua

4. FEI Number 20-3322628

Applied For
Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HORNSBY, DONALD S
16520 NW 208TH WAY
HIGH SPRINGS FL 32643

7. Name and Address of New Registered Agent

Name DONALD S HORNSBY

Street Address (P.O. Box Number is Not Acceptable)
840 NW 320 Ave

City Williston

FL

Zip Code 32696

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 fee if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE D
NAME HORNSBY, DONALD S
STREET ADDRESS 16520 NW 208TH WAY
CITY ST ZIP HIGH SPRINGS FL 32643 ☐ Delete

TITLE D
NAME CASON, WILLIAM J
STREET ADDRESS 20223 NE 6TH STREET
CITY ST ZIP GAINESVILLE FL 32609 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY ST ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY ST ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY ST ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY ST ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE HORNSBY, DONALD S
NAME
STREET ADDRESS 840 NW 320 Ave
CITY ST ZIP Williston, FL, 32696 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 607, 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:

William J Cason 1/23/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

386-454-1150