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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name

P93000030730 (4)

GLENN SPRINGS MANAGEMENT COMPANY

Country

9. Name and Address of Current Registered Agent

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WILLIAM P. KENNEDY

ORLANDO FL 32811

4125 SW 34TH STREET

Principal Place of Business

Mailing Address

2a. Mailing Address

Orty & State

 Z_{10}

Suite, Apt. #, etc

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4125 S.W. 34TH ST ORLANDO FL 32811

2. Principal Place of Business

Suite Apt # etc.

STE. 860

City & State

21

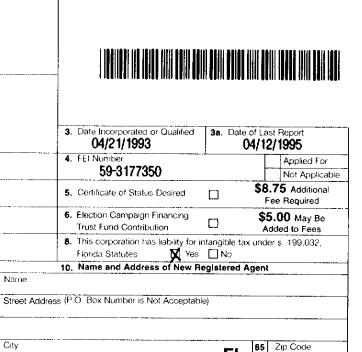
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Zip

4125 S.W. 34TH ST ORLANDO FL 32811



11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lan: familiar with, and accept the obligations of, Section 607.0505, Florida Statutes

Country

81 Name

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84 City

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SIGNATI	IRF:

Signature typed or printed habe of region if appoint and the table gas CNUTE. Beginner Agent signal are received when reaststing OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE ☐ DELETE 1 1 TITLE Director & President Treasurer KENNEDY, WILLIAM P NAME 1.2 NAME William P. Kennedy CR2E034 4125 SW 34TH STREET STREET ADORESS 1.3 STREET ADDRESS 4125 SW 34th St ORLANDO FL CiTY-ST-2IP 14 CHY-ST-ZIP Orlando, FL 32811 TITLE DELETE 2 1 Tifué Change Addition VP & Secretary NAME 2.2 NAME William A. Walker II STREET ADDRESS 2.3 STREET ADDRESS 4125 SW 34th Street CITY - ST - ZIP 2 4 CITY - \$1 - ZIP Orlando, FL 32811 TITLE DELFTE 3 1 T:FLE ☐ Change ** Addition Asst. Sec NAME 3.2 NAME Barbara J. Lee STREET ADDRESS 3.3 STREET ADORESS 4125 SW 34th Street DITY-ST-ZIP 3 4 CITY - ST - ZIF DELETE Orlando, FL 32811 TITLE 4.13006 Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5 1 THILE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST-ZIP 5.4 CiTY - ST - ZiP THILE DELETE 6-1 TITLE Change ☐ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CHTY-ST-ZIP 6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual 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 on an attachment with an address

SIGNATURE:

4/15/94

12/2