## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000011841 (8) NC -- 1HW, ING:--

Spring HILL UILLAGE, INC.

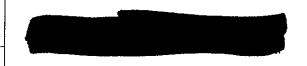
1025-9 N MAIN ST HIGH SPRINGS FL 32643

CITY-ST-ZIP

Mailing Address

P O DRAWER 1740 HIGH SPRINGS FL 32655

## **FILED** May 15 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/03/1997 2. Principal Place of Business 2a. Mailing Address Applied For 4. FEI Numbe 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. X Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent WELLBORN, WALTER H 1025-3 N MAIN ST Street Address (P.O. Box Number is Not Acceptable) HIGH SPRINGS FL 32643 83 City 85 Zip Code 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 Lorida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or printed name of registered upont and title if approable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE ☐ Change Addition NAME WELLBORN, WALTER H 1.2 NAME 1025-3 N MAIN ST STREET ADDRESS 1.3 STREET ADDRESS HIGH SPRINGS FL 32643 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 21 TITLE ☐ Change Addition WELLBORN, HILLARY H NAME 22 NAME 1025-3 N MAIN ST STREET ADDRESS 2.3 STREET ADDRESS HIGH SPRINGS FL 32643 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE Change 3.1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP 3000052558063 TITLE □ DELETE 61 TITLE Addition NAME 6.2 NAME -05/19/98--01003--020 STREET ADDRESS 6.3 STREET ADDRESS \*\*\*150.00

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual reports floe 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 project or trusted endowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if ghanged or only 1.100

6.4 City - St - ZiP