

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000003851

FILED
Feb 13, 2009
Secretary of State

Entity Name: SPRING HILL MANAGEMENT SPECIALISTS, INC.

Current Principal Place of Business:

152 WHITAKER ROAD
LUTZ, FL 33549

New Principal Place of Business:

Current Mailing Address:

PO BOX 1530
LUTZ, FL 33548

New Mailing Address:

FEI Number: 59-3520411

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRITT, JAMES D
152 WHITAKER ROAD
LUTZ, FL 33549 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: DP () Delete
Name: BRITT, JAMES
Address: 2109 BAYSHORE BLVD., PH-1
City-St-Zip: TAMPA, FL 33606

Title: CFO (X) Delete
Name: SARABIA, GARY
Address: 1247 KAYAK COVE
City-St-Zip: LUTZ, FL 33559

Title: VP () Delete
Name: GORMAN, JOHN D
Address: 1649 LYNSFIELD
City-St-Zip: LUTZ, FL 33549

Title: S () Delete
Name: MARTIN, THOMAS P
Address: 12709 BURMAN CT
City-St-Zip: ODESSA, FL 33556

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: JAMES D BRITT

DP

02/13/2009

Electronic Signature of Signing Officer or Director

Date