2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2025
Secretary of State
4452192905CC

DOCUMENT# 755910

Entity Name: PALM SPRINGS AT THE SPRINGS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O HMI
760 FLORIDA CENTRAL PKWY #200
LONGWOOD, FL 32750

Current Mailing Address:

C/O HMI
760 FLORIDA CENTRAL PKWY #200
LONGWOOD, FL 32750 US

FEI Number: 59-2267872

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HMI
C/O HMI
760 FLORIDA CENTRAL PKWY #200
LONGWOOD, FL 32750 US

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: LORIE FULKES 04/30/2025

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	TREASURER
Name	COLEMAN, JOANNE M
Address	C/O HMI 760 FLORIDA CENTRAL PKWY #200
City-State-Zip:	LONGWOOD FL 32750

Title	PRESIDENT
Name	DIERCKS, MIA
Address	C/O HMI 760 FLORIDA CENTRAL PKWY #200
City-State-Zip:	LONGWOOD FL 32750

Title	SECRETARY
Name	REAGAN, CHRISTINA
Address	C/O HMI 760 FLORIDA CENTRAL PKWY #200
City-State-Zip:	LONGWOOD FL 32750

Title	VP
Name	QUINN, LIAM
Address	C/O HMI 760 FLORIDA CENTRAL PKWY SUITE #200
City-State-Zip:	LONGWOOD FL 32750

Title	DIRECTOR
Name	MIDDLEMARK, RICHARD
Address	C/O HMI 760 FLORIDA CENTRAL PKWY SUITE #200
City-State-Zip:	LONGWOOD FL 32750

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MIA DIERCKS PRESIDENT 04/30/2025

Electronic Signature of Signing Officer/Director Detail — Date