

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003085

Entity Name: LIFE SPRINGS, INC

Current Principal Place of Business:

19460 E PENNSYLVANIA AVE
DUNNELLON, FL 34432

Current Mailing Address:

P.O. BOX 1969
DUNNELLON, FL 34430

FEI Number: 41-2061229

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NIEDERMAYER, JACK E
22281 SW PINE BLUFFS RD
DUNNELLON, FL 34431 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title D
Name RAMON, ELI
Address 8391 SW 202ND TERRACE
City-State-Zip: DUNNELLON FL 34431

Title DP
Name NIEDERMAYER, JACK A SR.
Address 11536 VOGT SPRINGS RD
City-State-Zip: DUNNELLON FL 34431

Title D, VP, TREASURER
Name NIEDERMAYER, ROBIN M
Address 11536 VOGT SPRINGS RD
City-State-Zip: DUNNELLON FL 34431

Title DIRECTOR
Name CARSBURG, RICHARD
Address 11873 N BLUFF COVE PATH
City-State-Zip: DUNNELLON FL 34434

Title DIRECTOR
Name LAYNE, JOHN C
Address 13580 SW 106TH PL
City-State-Zip: DUNNELLON FL 34432

Title SECRETARY
Name ROBERTSON, CHERYL
Address 9100 SW 206 COURT RD
City-State-Zip: DUNNELLON FL 34431

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: JACK NIEDERMAYER

DIRECTOR/PRESIDENT

02/10/2023

Electronic Signature of Signing Officer/Director Detail

_____ Date