

**2018 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, SECRETARY  
Name LAYNE, JOHN C  
Address 13580 SW 106TH PL  
City-State-Zip: DUNNELLON FL 34432

*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**

**03/11/2018**

Electronic Signature of Signing Officer/Director Detail

Date