

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13227

Entity Name: SPRUCE POINT, INC.**Current Principal Place of Business:**50 DIX AVE
ORMOND BEACH, FL 32174**Current Mailing Address:**P.O BOX 1205
PORT ORANGE, FL 32129 US**FEI Number:** 59-2675140**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BAKER, AMANDA L.
50 DIX AVE
ORMOND BEACH, FL 32174 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:** AMANDA L. BAKER

03/25/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name HOLMES, SUSAN
Address 1800 CHANDELLE COURT
City-State-Zip: PORT ORANGE FL 32128

Title SECRETARY, DIRECTOR
Name DOVE, GEOFF
Address 103 SILVER FERN COURT
City-State-Zip: PORT ORANGE FL 32128

Title ASST. TREASURER, ASST.
 SECRETARY
Name BAKER, AMANDA L.
Address 50 DIX AVE.
City-State-Zip: ORMOND BEACH FL 32174

Title VP, DIRECTOR
Name RAMSTAD, MARGARET
Address 105 SILVER FERN COURT
City-State-Zip: PORT ORANGE FL 32128

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: AMANDA L. BAKER

ASST. SECRETARY

03/25/2019

Electronic Signature of Signing Officer/Director Detail

Date