

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N35487

**Entity Name:** GLEN EAGLES AT SPRUCE CREEK HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Feb 27, 2014**  
**Secretary of State**  
**CC1478936460**

**Current Principal Place of Business:**

2041 KING AIR CT  
PORT ORANGE, FL 32128

**Current Mailing Address:**

2041 KING AIR CT  
PORT ORANGE, FL 32128 US

**FEI Number: 59-2980947**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

BALTZ, ALAN J  
2041 KING AIR CT  
PORT ORANGE, FL 32128 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 AXINN, JOAN  
Address 2078 COUNTRY CLUB DR.  
City-State-Zip: PORT ORANGE FL 32128

Title V/D  
Name PINSOFF, STEWART  
Address 1794 ROSCOE TURNER TRAIL  
City-State-Zip: PORT ORANGE FL 32128

Title T/D  
Name BALTZ, ALAN J  
Address 2041 KING AIR COURT  
City-State-Zip: PORT ORANGE FL 32128

Title P/D  
Name SIMPSON, GEORGE  
Address 1925 CANADAIR CT  
City-State-Zip: PORT ORANGE FL 32128

Title S/D  
Name BOTTOMS, ALICE  
Address 1913 CANADAIR CT  
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: ALAN J. BALTZ**

**TREASURER/DIRECTOR 02/27/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date