

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10654

FILED
Feb 27, 2009
Secretary of State

Entity Name: GATOR TRACE MASTER PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4062 GARDEN VILLAS CT.
FT. PIERCE, FL 34982 US

New Principal Place of Business:

Current Mailing Address:

4062 GARDEN VILLAS CT.
FT. PIERCE, FL 34982 US

New Mailing Address:

FEI Number: 59-2648475

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LENNON, JAMES
4062 GARDEN VILLAS
FT. PIERCE, FL 34982 US

Name and Address of New Registered Agent:

LENNON, JAMES J
4062 GARDEN VILLAS
FT. PIERCE, FL 34982 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: JAMES LENNON

02/27/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: LENNON, JAMES
Address: 4062 GARDEN VILLAGE CT.
City-St-Zip: FT. PIERCE, FL 34982 US

Title: TD () Delete
Name: KAY, ELEANOR
Address: 4215 GATOR TRACE AVENUE-F
City-St-Zip: FORT PIERCE, FL 34982

Title: AT () Delete
Name: VALERNCIA, STEVE
Address: 4358 GATOR TERRACE CIRCLE
City-St-Zip: FORT PIERCE, FL 34982

Title: VP () Delete
Name: CAWTHORNE, DALE
Address: 4176 B GATOR TRACE VILLAS CT
City-St-Zip: FORT PIERCE, FL 34982

Title: AT () Delete
Name: HUGHES, LANTIE
Address: 4215 GATOR TRACE ROAD
City-St-Zip: FORT PIERCE, FL 34982

Title: AT () Delete
Name: OLEN, KEN
Address: 4097 GATOR TERRACE RD.
City-St-Zip: FORT PIERCE, FL 34982

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: LENNON, JAMES J
Address: 4062 GARDEN VILLAGE CT.
City-St-Zip: FT. PIERCE, FL 34982 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: AT (X) Change () Addition
Name: VALENCIA, STEVE
Address: 4358 GATOR TRACE CIRCLE
City-St-Zip: FORT PIERCE, FL 34982

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: AT (X) Change () Addition
Name: OLEN, KEN
Address: 4097 GATOR TRACE RD.
City-St-Zip: FORT PIERCE, FL 34982

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JAMES LENNON

TD

02/27/2009

Electronic Signature of Signing Officer or Director

Date