## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N12917

FILED Apr 26, 2006 Secretary of State

Entity Name: SPENCER TRAILS PROPERTY OWNER'S ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2496 QUARTER HORSE TRAIL 5350 OTTER LANE MIDDLEBURG, FL 32068 MIDDLEBURG, FL 32068

Current Mailing Address: New Mailing Address:

2496 QUARTER HORSE TRAIL 5350 OTTER LANE MIDDLEBURG, FL 32068 MIDDLEBURG, FL 32068

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

ROBIN HARRISON WHITLEY, VICKIE 2496 QUARTER HORSE TRAIL 5350 OTTER LANE

MIDDLESBURG, FL 32068 US MIDDLESBURG, FL 32068 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: VICKIE WHITLEY 04/26/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD ( ) Delete Title: BD (X) Change ( ) Addition Name: GUTHRIE, HARRY S Name: FULFORD, ROGER

Address: 2496 QUARTER HORSE TR Address: 5349 OTTER LANE
City-St-Zip: MIDDLEBURG, FL 32068 City-St-Zip: MIDDLEBURG, FL 32068

Title: STD ( ) Delete Title: VD (X) Change ( ) Addition Name: ROBIN HARRISON, Name: TURNER, JOE

Name: ROBIN HARRISON, Name: TURNER, JOE
Address: 2479 QUARTER HORSE TRAIL Address: 5322 OTTER LANE
City-St-Zip: MIDDLEBURG, FL City-St-Zip: MIDDLEBURG, FL 32068

Title: PD ( ) Delete Title: STD (X) Change ( ) Addition Name: GUTHRIE, HARRY S Name: WHITLEY, VICKIE

Address: 2496 QUARTER HORSE TR. Address: 5350 OTTER LANE
City-St-Zip: MIDDLEBURG, FL 32068 City-St-Zip: MIDDLEBURG, FL 32068

Title: VP (X) Delete Title: ( ) Change ( ) Addition

 Name:
 COWARD, LESLIE R
 Name:

 Address:
 5322 RAZOR BACK CT
 Address:

 City-St-Zip:
 MIDDLEBURG, FL 32068
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: VICKIE WHITLEY STD 04/26/2006