

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27066

FILED  
Mar 18, 2010  
Secretary of State

**Entity Name:** TRAILS OF MONTVERDE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

15350 ARABIAN WAY  
MONTVERDE, FL 34756 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 560644  
MONTVERDE, FL 34756 US

**New Mailing Address:**

**FEI Number:** 59-2921555      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

BEGOVICH, JEFF  
15350 ARABIAN WAY  
MONTVERDE, FL 34756 US

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

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

**OFFICERS AND DIRECTORS:**

Title: T  
Name: BEGOVICH, AMANDA  
Address: 15350 ARABIAN WAY  
City-St-Zip: MONTVERDE, FL 34756

Title: P  
Name: BERRY, STEVE  
Address: 15932 THOROUGHbred LANE  
City-St-Zip: MONTVERDE, FL 34756

Title: V  
Name: TERRY, WENDY  
Address: 16623 APPALOOSA TR  
City-St-Zip: MONTVERDE, FL 34756

Title: D  
Name: BERRY, SANDY  
Address: 15643 PADDOCK DR  
City-St-Zip: MONTVERDE, FL 34756

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 BEGOVICH

TRES

03/18/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date