2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9300000156

FILED Jan 16, 2009 Secretary of State

Entity Name: SUMMERLIN TRACE CONDOMINIUM NO. 9 ASSOCIATION, INC.

Current Principal Place of Business:

BCH MANAGEMENT GROUP
1840 BOY SCOUT DR., SUITE B
FORT MYERS, FL 33907 US

New Principal Place of Business:

New Principal Place of Business:

BCH MANAGEMENT GROUP 1840 BOY SCOUT DR., SUITE B FORT MYERS, FL 33907 US

Current Mailing Address:

FEI Number: 65-0460778 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MOORE, DIANA L 1840 BAY SCOUT DR STE B FORT MYERS, FL 33907 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

New Mailing Address:

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: VPD (X) Change () Addition Name: VILORIA, CLAUDIA Name: MARTIN, NANCY Address: 14451 LAKEWOOD TRACE CT, #201

City-St-Zip: FT. MYERS, FL 33919 City-St-Zip: FT. MYERS, FL 33919

Title: STD () Delete Title: () Change () Addition

 Name:
 JOHNSON, MARGARET
 Name:

 Address:
 14451 LAKEWOOD TR CT, #101
 Address:

 City-St-Zip:
 FORT MYERS, FL
 City-St-Zip:

Title: PD () Delete Title: () Change () Addition

 Name:
 CENTINEO, ROSE
 Name:

 Address:
 14451 LAKEWOOD TRACE COURT / STE - 104
 Address:

 City-St-Zip:
 FORT MYERS, FL
 City-St-Zip:

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: DIANA MOORE AGT 01/16/2009