

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006460

FILED
Feb 24, 2009
Secretary of State

Entity Name: TRAILS END HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3384 LOST CANYON PLACE
COCOA, FL 329267414 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 236473
COCOA, FL 329236473 US

New Mailing Address:

FEI Number: 59-3190014

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DRAVES, MILTON R
3384 LOST CANYON PL.
COCOA, FL 32926 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: PD () Delete
Name: ERNST, FRANK
Address: 3363 ECHO RIDGE PL
City-St-Zip: COCOA, FL 32926

Title: T () Delete
Name: DRAVES, MILTON
Address: 3384 LOST CANYON PL.
City-St-Zip: COCOA, FL 32926

Title: VD () Delete
Name: STORMANT, EDMUND
Address: 3427 ROCKY GAP PL
City-St-Zip: COCOA, FL 32926

Title: S () Delete
Name: MACARTHUR, LESLIE
Address: 3435 LOST CANTON PL
City-St-Zip: COCOA, FL 32926

Title: D () Delete
Name: MOSBY, JOHN
Address: 3376 ROCKY GAP
City-St-Zip: COCOA, FL 32926

Title: D () Delete
Name: ERNST, JANINE
Address: 3311 CRAGGY BLUFF PL
City-St-Zip: COCOA, FL 32926

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VD (X) Change () Addition
Name: MOSBY, JOHN
Address: 3376 ROCKY GAP PL
City-St-Zip: COCOA, FL 32926

Title: S (X) Change () Addition
Name: ERNST, JANINE
Address: 3311 CRAGGY BLUFF PL
City-St-Zip: COCOA, FL 32926

Title: D (X) Change () Addition
Name: STEVENS, RICHARD
Address: 3351 CRAGGY BLUFF PL
City-St-Zip: COCOA, FL 32926

Title: D (X) Change () Addition
Name: JOHNSON, MERRIAM
Address: 3353 ECHO RIDGE PL
City-St-Zip: COCOA, FL 32926

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: MILTON R. DRAVES

T

02/24/2009

Electronic Signature of Signing Officer or Director

Date