

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000000208

**FILED**  
**Feb 25, 2015**  
**Secretary of State**  
**CC5405191195**

**Entity Name:** 2011 TROUT RIVER COMMERCIAL OWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

189 SAN JUAN DRIVE  
PONTE VEDRA BEACH, FL 30282

**Current Mailing Address:**

220 S SHIPWRECK AVE  
PONTE VEDRA, FL 30281 US

**FEI Number: 46-0541631**

**Certificate of Status Desired: No**

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

LAW OFFICES OF C. GUY BOND, P.A.  
11512 LAKE MEAD AVENUE  
SUITE 303  
JACKSONVILLE, FL 32256 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

**Officer/Director Detail :**

Title PSTD  
Name STOUDEMIRE, CARL EIII  
Address 189 SAN JUAN DRIVE  
City-State-Zip: PONTE VEDRA BEACH FL 30282

Title D  
Name STOUDEMIRE, JUDY  
Address 189 SAN JUAN DRIVE  
City-State-Zip: PONTE VEDRA BEACH FL 30282

Title VP, D  
Name TARRANT, LANG C  
Address 8539 GATE PARKWAY WEST  
#1428  
City-State-Zip: JACKSONVILLE FL 32216

*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: LANG TARRANT**

**OFFICER**

**02/25/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date