

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759632

FILED
Jan 06, 2009
Secretary of State

Entity Name: THE TRAILS PROPERTY OWNERS, INC.

Current Principal Place of Business:

239 FRENCHMANS
CREEK WAY
WINTER HAVEN, FL 33884

New Principal Place of Business:

Current Mailing Address:

239 FRENCHMANS
CREEK WAY
WINTER HAVEN, FL 33884

New Mailing Address:

FEI Number: 59-2287349

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STAVROS, KAY
239 FRENCHMANS CREEK WAY
WINTER HAVEN, FL 33884 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: PTD () Delete
Name: BENNETT, JAY
Address: 258 FRENCHMANS CREEK
City-St-Zip: WINTER HAVEN, FL 33884

Title: VD () Delete
Name: WHITWORTH, DALE
Address: 210 OLD SPANISH WAY
City-St-Zip: WINTER HAVEN, FL 33884

Title: S () Delete
Name: BENNETT, KIM
Address: 258 FRENCHMANS CREEK
City-St-Zip: WINTER HAVEN, FL 33884

Title: TD () Delete
Name: STAVROS, KAY
Address: 239 FRENCHMANS CREEK WAY
City-St-Zip: WINTER HAVEN, FL 33884

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: () Change () Addition
Name:
Address:
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: KAY STAVROS

TD

01/06/2009

Electronic Signature of Signing Officer or Director

Date