2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007470

Current Mailing Address:

Entity Name: TRADD'S LANDING HOMEOWNERS ASSOCIATION, INC.

FILED Jul 16, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1135 EAST AVE. 2180 WEST SR 434 CLERMONT, FL 34711 SUITE 5000

SUITE 5000 LONGWOOD, FL 32779

LONGWOOD, FL 3211

1135 EAST AVE. 2180 WEST SR 434

CLERMONT, FL 34711 SUITE 5000

LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 54-2074647 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:

LADD, DALE J HART, JAMES W JR
1135 EAST AVE. C/O SENTRY MANAGEMENT INC
CLERMONT, FL 34711 2180 WEST SR 434 SUITE 5000

ERMONT, FL 34711 2180 WEST SR 434 SOITE SOL LONGWOOD, FL 32779 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: JAMES W HART JR 07/16/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 LADD, DALE J
 Name:
 HACKER, E BING

 Address:
 1135 EAST AVE.
 Address:
 1635 E HWY 50 STE 200

 City-St-Zip:
 CLERMONT, FL 34711
 City-St-Zip:
 CLERMONT, FL 34711

Title: VD () Delete Title: VPD (X) Change () Addition Name: LADD, DARRYL A Name: LAWSON, BRUCE

 Address:
 1135 EAST AVE.
 Address:
 1635 E HWY 50 STE 200

 City-St-Zip:
 CLERMONT, FL 34711
 City-St-Zip:
 CLERMONT, FL 34711

Title: STD () Delete Title: (X) Change () Addition OGDEN, MIMI Name: SODERMARK, CHRISTINE Name: 1135 EAST AVE. 1635 W HWY 50 STE 200 Address: Address: City-St-Zip: CLERMONT, FL 34711 City-St-Zip: CLERMONT, FL 34711

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: E BING HACKER PD 07/16/2004