

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008100

FILED
Apr 26, 2009
Secretary of State

Entity Name: ASBURY TRACE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3630 ASBURY TRACE DR
GREEN COVE SPRINGS, FL 32043 US

New Principal Place of Business:

3610 ASBURY TRACE DR
GREEN COVE SPRINGS, FL 32043 US

Current Mailing Address:

3630 ASBURY TRACE DR
GREEN COVE SPRINGS, FL 32043 US

New Mailing Address:

3610 ASBURY TRACE DR
GREEN COVE SPRINGS, FL 32043 US

FEI Number: 27-0048909

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREAS, NANCY R
3630 ASBURY TRACE DR
GREEN COVE SPRINGS, FL 32043 US

Name and Address of New Registered Agent:

SINGER, STEVEN A
3610 ASBURY TRACE DR
GREEN COVE SPRINGS, FL 32043 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: STEVEN A. SINGER

04/26/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FREAS, NANCY R
Address: 3630 ASBURY TRACE DR
City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

Title: S () Delete
Name: FARIA, KATHY
Address: 3626 ASBURY TRACE DR
City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

Title: T () Delete
Name: FURLOUGH, DEBRA
Address: 3615 ASBURY TRACE DR
City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SINGER, STEVEN A
Address: 3610 ASBURY TRACE DR
City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

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

Title: T (X) Change () Addition
Name: FURLOUGH, ROBERT
Address: 3615 ASBURY TRACE DR
City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

Title: VP () Change (X) Addition
Name: LAGONE, JOSEPH
Address: 3625 ASBURY TRACE DR
City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

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: STEVEN A. SINGER

P

04/26/2009

Electronic Signature of Signing Officer or Director

Date