2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000033

FILED Apr 03, 2005 Secretary of State

Entity Name: SOUTHERN TRACE PROPERTY OWNERS ASSOCIATION, INC.

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

1100 MAIN STREET 1020 LAKE SUMTER LANDING THE VILAGES, FL 32159 THE VILAGES, FL 32162

Current Mailing Address: New Mailing Address:

1100 MAIN STREET 1020 LAKE SUMTER LANDING THE VILAGES, FL 32159 THE VILAGES, FL 32162

FEI Number: 54-2098284 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:

LITTLE, CRAIG W SKATES, JEFFREY P
976 DEL MAR DRIVE 1028 LAKE SUMTER LANDING
THE VILLAGES, FL 32159 US THE VILLAGES, FL 32162 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: JEFFREY P. SKATES 04/03/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 MATHEWS, D.W.
 Name:
 MATHEWS, D.W.

 Address:
 1100 MAIN STREET
 Address:
 1020 LAKE SUMTER LANDING

Address: 1100 MAIN STREET Address: 1020 LAKE SOMTER LANDING
City-St-Zip: THE VILAGES, FL 32159 City-St-Zip: THE VILAGES, FL 32162

Title: VD () Delete Title: VD (X) Change () Addition Name: MORSE, MARK G Name: MORSE, MARK G

Address: 1100 MAIN STREET Address: 1020 LAKE SUMTER LANDING
City-St-Zip: THE VILAGES, FL 32162

Address: 1020 LAKE SUMTER LANDING
City-St-Zip: THE VILAGES, FL 32162

Title: STD () Delete Title: SD (X) Change () Addition Name: DZURO, MARTIN L Name: DZURO, MARTIN L

Address: 1100 MÁIN STREET Address: 1020 LÁKE SUMTER LANDING City-St-Zip: THE VILAGES, FL 32159 City-St-Zip: THE VILAGES, FL 32162

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: D.W. MATHEWS P 04/03/2005