

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 19, 2008
Secretary of State

DOCUMENT# N03000000612

Entity Name: ABBEY TRACE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**5955 T. G. LEE BLVD
SUITE 300
ORLANDO, FL 32822 US**New Principal Place of Business:****Current Mailing Address:**5955 T. G. LEE BLVD
SUITE 300
ORLANDO, FL 32822 US**New Mailing Address:****FEI Number:** 20-2327451**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**JOHN BARIC
6905 NORTH WICKHAM ROAD, SUITE 501
SUITE 501
MELBOURNE, FL 32940 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:** PD () Delete
Name: JANSEN, TELASHIA
Address: 6905 NORTH WICKHAM ROAD, SUITE 401
City-St-Zip: MELBOURNE, FL 32940 US**Title:** DV () Delete
Name: MALONE, PAM
Address: 5909-G HAMPTON OAKS PARKWAY
City-St-Zip: TAMPA, FL 33610 US**Title:** DST () Delete
Name: O'TOOLE, HAZEL
Address: 6905 NORTH WICKHAM ROAD, SUITE 401
City-St-Zip: MELBOURNE, FL 32940 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PD (X) Change () Addition
Name: JO ANN, SWENSSON
Address: 6905 NORTH WICKHAM ROAD, SUITE 401
City-St-Zip: MELBOURNE, FL 32940 US**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: REBECCA FURLOW

AGNT

09/19/2008

Electronic Signature of Signing Officer or Director

Date