

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002598

FILED
Apr 21, 2011
Secretary of State

Entity Name: OZONA TRACE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

593 BAY STREET
PALM HARBOR, FL 34683

New Principal Place of Business:

563 BAY STREET
PALM HARBOR, FL 34683

Current Mailing Address:

P.O. BOX 246
OZONA, FL 34660

New Mailing Address:

FEI Number: 56-2354223

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREEN, MADELINE A
593 BAY STREET
PALM HARBOR, FL 34683 US

Name and Address of New Registered Agent:

SWANSON, KIMBERLY M
563 BAY STREET
PALM HARBOR, FL 34683 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: KIMBERLY SWANSON

04/21/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: SWANSON, KIMBERLY M
Address: 563 BAY STREET
City-St-Zip: PALM HARBOR, FL 34683

Title: SD
Name: CLEMANS, JENNIFER
Address: 517 BAY STREET
City-St-Zip: PALM HARBOR, FL 34683

Title: VD
Name: CHOUINARD, DAVID
Address: 3583 WEMBLEY WAY #105
City-St-Zip: PALM HARBOR, FL 34685

Title: TD
Name: ALLISON, RICHARD S
Address: P.O. BOX 361
City-St-Zip: OZONA, FL 34660

Title: D
Name: BRADHAM, TERRI L
Address: 572 BAY STREET
City-St-Zip: PALM HARBOR, FL 34683

I hereby 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 all other like empowered.

SIGNATURE: KIMBERLY SWANSON

PD

04/21/2011

Electronic Signature of Signing Officer or Director

Date