2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008394

FILED Apr 21, 2009 Secretary of State

Entity Name: STRAITON AT BALLANTRAE TOWNHOMES ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
844 OLD	PASCO ROA	D		
SUITE 100		22544		
VESLEY	CHAPEL, FL	33544		
Current Mailing Address:		New Mailing Address:		
	PASCO ROA	D		
SUITE 100) CHAPEL, FL :	22544		
	,			
El Number	: 57-1211310	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
844 OLD	& COMPANY PASCO ROA			
)			
SUITE 100 VESLEY (
VESLEY () CHAPEL, FL	33544 US	ourpose of changing its registere	ed office or registered agent, or both,
VESLEY (the above the State) CHAPEL, FL named entity e of Florida.	33544 US	ourpose of changing its registere	ed office or registered agent, or both,
VESLEY (the above the State) CHAPEL, FL : named entity e of Florida. RE:	33544 US		ed office or registered agent, or both, Date
VESLEY (The above on the State SIGNATUR) CHAPEL, FL : named entity e of Florida. RE:	33544 US submits this statement for the nic Signature of Registered Ag	ent	
VESLEY (he above the State	OCHAPEL, FL: named entity e of Florida. RE: Electro S AND DIREC	33544 US submits this statement for the nic Signature of Registered Agentors:) Delete	ent	Date
HESLEY (The above the State IGNATUR FFICER: The ame: The ame: The above the ame: The above the ame: The above the ame: The above the above the ame: The above	CHAPEL, FL: e named entity e of Florida. RE: Electro S AND DIRECTO P (AMATO, BILL 17513 STINCH LAND O' LAKE	33544 US submits this statement for the nic Signature of Registered Age CTORS:) Delete HAR DRIVE ES, FL 34638) Delete CLAUDIA LANE	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

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: BILL AMATO P 04/21/2009