

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009827

FILED
Apr 01, 2009
Secretary of State

Entity Name: GREATER TRILBY COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 33
TRILBY, FL 335930006

New Principal Place of Business:

37452 TRILBY ROAD
DADE CITY, FL 33523

Current Mailing Address:

P.O. BOX 33
TRILBY, FL 335930006

New Mailing Address:

P.O. BOX 6
TRILBY, FL 335930006

FEI Number: 20-1815131

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RILEY, RICHARD K
20235 OLD TRILBY RD
DADE CITY, FL 33523 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: CD () Delete
Name: BLACK, SCOTT
Address: 13951 NIRATH ST
City-St-Zip: DADE CITY, FL 33525

Title: SD () Delete
Name: RILEY, RICHARD K
Address: 20235 OLD TRILBY RD.
City-St-Zip: DADE CITY, FL 33523

Title: VD () Delete
Name: GRIGER, JUDITH
Address: 39005 RD 575
City-St-Zip: DADE CITY, FL 33523

Title: PD () Delete
Name: GREEN, HERB
Address: 20950 BEAVER RD.
City-St-Zip: DADE CITY, FL 33523

Title: TD () Delete
Name: ROWE, KIM
Address: 37644 TRILBY RD
City-St-Zip: DADE CITY, FL 33525

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VD (X) Change () Addition
Name: GIGER, JUDITH
Address: 39005 RD 575
City-St-Zip: DADE CITY, FL 33523

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: RICHARD K RILEY

SD

04/01/2009

Electronic Signature of Signing Officer or Director

Date