


# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 27, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N04039</b> 1. Entity Name TRILLIUM COURT HOME OWNERS ASSOCIATION, INC.	
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Principal Place of Business 3532 TRILLIUM COURT TALLAHASSEE, FL 32312 US	Mailing Address 3532 TRILLIUM COURT TALLAHASSEE, FL 32312 US
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04252005 No Chg-NP CR2E037 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-2937089	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  
  
MILLER, DANIEL S.  
3532 TRILLIUM CT.  
TALLAHASSEE, FL

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature typed or printed name of agent and title (face/cable) (PRINT) Registered Agent Signature required when certifying

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY ST ZIP	D ANSLEY, LEIGH H. 3244 TRILLIUM CT. TALLAHASSEE, FL
TITLE NAME STREET ADDRESS CITY ST ZIP	PD MILLER, DANIEL S. 3532 TRILLIUM CT. TALLAHASSEE, FL
TITLE NAME STREET ADDRESS CITY ST ZIP	ST MILLER, REBECCA G. 3532 TRILLIUM CT. TALLAHASSEE, FL
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000000336121  
04/27/05-80114-008 61.25

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Daniel S. Miller 4/25/05 850-893-5757  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR