2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N05000006565

TI FILED
Sep 11, 2009
Secretary of State

Entity Name: TRE-VISTE OWNERS ASSOCIATION INC.

Current Principal Place of Business: New Principal Place of Business:

1525 VANDERVORT ROAD 4420 EAST COUNTY HIGHWAY 30A LUTZ, FL 33549 SANTA ROSA BEACH, FL 32459

Current Mailing Address: New Mailing Address:

1525 VANDERVORT ROAD C/O WALTON SANDS, LLC LUTZ, FL 33549 P.O. BOX 4743

SANTA ROSA BEACH, FL 32459

FEI Number: 32-0070888 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MCELROY, KRISTI CRAIG, CHANA M
1525 VANDERVORT RD. 297 CAMPBELL STREET

LUTZ, FL 33549 US SANTA ROSA BEACH, FL 32459 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: CHANA M. CRAIG 09/11/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 KRISTI MCELROY
 Name:
 ROWE, PATRICIA

 Address:
 1525 VANDERVORT ROAD
 Address:
 1000 STONEGATE COURT

 City-St-Zip:
 LUTZ, FL 33549
 City-St-Zip:
 ROSWELL, GA 30075

Title: () Delete Title: VP () Change (X) Addition

 Name:
 Name:
 MOAK, GERRE

 Address:
 Address:
 P.O. BOX 242

City-St-Zip: City-St-Zip: BOGUE CHITTO, MS 39629

Title: () Delete Title: ST () Change (X) Addition

 Name:
 Name:
 DAVIS, JIM

 Address:
 Address:
 2771 REGATTA WAY

 City-St-Zip:
 City-St-Zip:
 TUSCALOOSA, AL 35406

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: JIM DAVIS SEC 09/11/2009