2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010040

FILED Mar 10, 2009 Secretary of State

Entity Name: TRINITY VILLAGE CENTER PROPERTY OWNERS' ASSOCIATION, INC.

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

25400 US HIGHWAY 19 NORTH 8249 KRISTEL CIRCLE SUITE 116 PORT RICHEY, FL 34668

CLEARWATER, FL 33763

8249 KRISTEL CIRCLE PORT RICHEY, FL 34668

Current Mailing Address:

FEI Number: 20-4209370 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

New Mailing Address:

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

MICK, JAMIE

TAMPA BAY PROPERTY MANAGEMENT, INC.

8249 KRISTEL CIRCLE

8249 KRISTEL CIRCLE

PORT RICHEY, FL 34668 US PORT RICHEY, FL 34668 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: JAMIE K. MICK 03/10/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PRES (X) Change () Addition

 Name:
 LEAHON, LAWRENCE P
 Name:
 LEAHON, LAWRENCE P

 Address:
 557 ALTERNATE 19 NORTH
 Address:
 557 ALTERNATE 19 NORTH

 City-St-Zip:
 PALM HARBOR, FL 34683
 City-St-Zip:
 PALM HARBOR, FL 34683

Title: VD () Delete Title: VP (X) Change () Addition
Name: BRANDON, DAVID L

Address: 557 ALTERNATE 10 NORTH

Address: 557 ALTERNATE 19 NORTH Address: 557 ALTERNATE 19 NORTH
City-St-Zip: PALM HARBOR, FL 34683 City-St-Zip: PALM HARBOR, FL 34683

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: JAMIE K. MICK AGT. 03/10/2009