2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000795

FILED Sep 17, 2009 Secretary of State

Entity Name: PALMA SOLA TRACE VILLAS HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 2816 W. FOUNTAIN BLVD 501 N. CATTLEMEN ROAD TAMPA, FL 33609 SUITE 100 SARASOTA, FL 34232 **Current Mailing Address:** New Mailing Address: 501 N. CATTLEMEN ROAD SUITE 100 2816 W. FOUNTAIN BLVD TAMPA, FL 33609 SARASOTA, FL 34232 US FEI Number: 65-1295354 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HENDERSON, FRANK M VP HANSON, JACK B 1600 W. ĆOLONIAL DRIVE 2816 W. FOUNTAIN BLVD TAMPA, FL 33609 ORLANDO, FL 32804 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: JACK B. HANSON 09/17/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition HENDERSON, ALLEN ASHER, JOHN P Name: Name: PO BOX 10947 Address: 501 N. CATTLEMEN ROAD, SUITE 100 Address: City-St-Zip: TAMPA, FL 33679 City-St-Zip: SARASOTA, FL 34232 US Title: Title: (X) Change () Addition () Delete HENDERSON, FRANK Name: FOOTE, TERRY L Name: Address: PO BOX 10947 Address: 501 N. CATTLEMEN ROAD, SUITE 100 City-St-Zip: TAMPA, FL 33679 City-St-Zip: SARASOTA, FL 34232 US Title: () Delete Title: (X) Change () Addition ADKINS, WILLIAM M JR. WILMETH, RICHARD M Name: Name: 501 N. CATTLEMEN ROAD, SUITE 100 Address: PO BOX 10947 Address: City-St-Zip: TAMPA, FL 33679 City-St-Zip: SARASOTA, FL 34232 US Title: () Delete Title: VST () Change (X) Addition Name: Name: CAMPBELL, MICHELLE M Address: Address: 501 N. CATTLEMEN ROAD, SUITE 100 SARASOTA, FL 34232 US City-St-Zip: City-St-Zip: Title: () Delete Title: () Change (X) Addition MERRILL, S. TODD Name: Name: 4905 W. LAUREL STREET, SUITE 100 Address: Address: City-St-Zip: City-St-Zip: TAMPA, FL 336073826 US Title: () Delete Title: () Change (X) Addition IACINO RITA J Name: Name: Address: Address: 4905 W. LAUREL STREET, SUITE 100 TAMPA, FL 336073826 US City-St-Zip: 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: RITA JANE IACINO AS 09/17/2009