2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2009
Secretary of State

DOCUMENT# N06000006478

Entity Name: TROUT RIVER BLUFF OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2955 HARTLEY ROAD STE 108
JACKSONVILLE, FL 32257

New Principal Place of Business:

2955 HARTLEY ROAD
STE 108
JACKSONVILLE, FL 32257

Current Mailing Address:

2955 HARTLEY ROAD STE 108
JACKSONVILLE, FL 32257

New Mailing Address:

2955 HARTLEY ROAD
STE 108
JACKSONVILLE, FL 32257

FEI Number: 56-2592669 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MATOVINA, GREGORY E
2955 HARTLEY ROAD STE 108
JACKSONVILLE, FL 32257 US

Name and Address of New Registered Agent:

MATOVINA, GREGORY E
2955 HARTLEY ROAD
STE 108
JACKSONVILLE, FL 32257 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: _____ 01/30/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: MATOVINA, GREGORY E
Address: 2955 HARTLEY ROAD STE 108
City-St-Zip: JACKSONVILLE, FL 32257

Title: DVT ( ) Delete
Name: HUDSON, SHARON
Address: 2955 HARTLEY ROAD STE 108
City-St-Zip: JACKSONVILLE, FL 32257

Title: DS ( ) Delete
Name: CASSIS, MICHAEL A
Address: 2955 HARTLEY ROAD STE 108
City-St-Zip: JACKSONVILLE, FL 32257

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: GREGORY E. MATOVINA DP 01/30/2009
Electronic Signature of Signing Officer or Director — Date