


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 25, 2004 8:00 am
Secretary of State

03-25-2004 90052 002 ****61.25

DOCUMENT # N11561	
1. Entity Name GULF TRACE HOMEOWNERS ASSOCIATION, INC.	

Principal Place of Business 3300 HEARTHSTONE CT. HOLIDAY FL 34691 US	Mailing Address PO BOX 3888 HOLIDAY FL 34690 US
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24023403



MOORE CR2E037 (11/03)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-2898707	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent PEYTON, DONALD R 7317 LITTLE RD. NEW PORT RICHEY FL 34654

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25 Due By May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE DPT	NAME WALSH, MICHAEL J JR. STREET ADDRESS 3306 HEARTHSOTNE CT CITY - ST - ZIP HOLIDAY FL 34691	<input checked="" type="checkbox"/> Delete	President Charles B. Tuidor 2805 Brambleridge Ct. Holiday, FL 34691 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE DT	NAME DAVIDSON, SUSAN W STREET ADDRESS 3629 NETTLE CREEK CT CITY - ST - ZIP HOLIDAY FL 34691	<input type="checkbox"/> Delete	Vice-President Jeanine Brunning 2828 Woodrose Ct. Holiday, FL 34691 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE DVP	NAME THOMAS, PETER STREET ADDRESS 2919 FEATHERSTONE CT CITY - ST - ZIP HOLIDAY FL 34691	<input type="checkbox"/> Delete	Secretary Corrine Patera 2817 Windridge Drive Holiday, FL 34691 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE DS	NAME THOMAS, JANE M STREET ADDRESS 2832 WOODROSE CT CITY - ST - ZIP HOLIDAY FL 34691	<input checked="" type="checkbox"/> Delete	
TITLE D	NAME EGLESTON, DAVID R STREET ADDRESS 3318 GLENWOOD CIR CITY - ST - ZIP HOLIDAY FL 34691	<input type="checkbox"/> Delete	
TITLE D	NAME TOSCANO, ANTHONY STREET ADDRESS 3266 HEARTHSTONE CT CITY - ST - ZIP HOLIDAY FL 34691	<input type="checkbox"/> Delete	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Charles B. Tuidor **March 3, 2004** **727-937-5337**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #