

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**SECRETARY OF STATE**  
**DIVISION OF CORPORATIONS**

95 MAR 28 PM 6:20

DOCUMENT # **N15344** (7)

1. Corporation Name  
**OLD TRAIL HOMEOWNERS ASSOCIATION, INC.**

Principal Place of Business Mailing Address  
**17200 JONATHAN DRIVE 17200 JONATHAN DRIVE**  
**JUPITER FL 33477-5823 JUPITER FL 33477-5823**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>06/12/1986</b>	3a. Date of Last Report <b>03/03/1994</b>
4. FEI Number <b>59-2717786</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	<b>\$68.75</b> Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 <b>400 Toney Penna Drive</b> Suite, Apt. #, etc.	2a. Mailing Address 25 <b>400 Toney Penna Drive</b> Suite, Apt. #, etc.
22 City & State 23 <b>Jupiter, FL</b>	27 City & State 28 <b>Jupiter, FL</b>
24 Zip <b>33458</b> Country	29 Zip <b>33458</b> Country

9. Name and Address of Current Registered Agent <b>ALEXANDER, LARRY</b> <b>505 SO. FLAGLER DR., STE. 1100</b> <b>WEST PALM BEACH FL 33402</b>	10. Name and Address of New Registered Agent 81 Name <b>Dickinson Management, Inc.</b> 82 Street Address (P.O. Box Number is Not Acceptable) <b>400 Toney Penna Drive</b> 83 84 City <b>Jupiter</b> FL 85 Zip Code <b>33458</b>
--	--

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Shirley M. Springer* DATE **3-23-95**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <b>ADEN, BILL</b>	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>ADEN, BILL</b>	1.2 NAME	
STREET ADDRESS	<b>18680 SE OLD TRAIL DR., E.</b>	1.3 STREET ADDRESS	
CITY - ST - ZIP	<b>JUPITER FL 33478</b>	1.4 CITY - ST - ZIP	
TITLE	VD <b>KING, BILL</b>	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>KING, BILL</b>	2.2 NAME	
STREET ADDRESS	<b>3533 SE LONG POND TERRACE</b>	2.3 STREET ADDRESS	
CITY - ST - ZIP	<b>JUPITER FL 33478</b>	2.4 CITY - ST - ZIP	
TITLE	SD <b>REICHEL, BILL</b>	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>REICHEL, BILL</b>	3.2 NAME	
STREET ADDRESS	<b>4033 SE HAMMOCK PLACE</b>	3.3 STREET ADDRESS	
CITY - ST - ZIP	<b>JUPITER FL 33478</b>	3.4 CITY - ST - ZIP	
TITLE	TD <b>HARTLEY, GREGG</b>	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>HARTLEY, GREGG</b>	4.2 NAME	
STREET ADDRESS	<b>18218 SE OLD TRAIL DR., E.</b>	4.3 STREET ADDRESS	
CITY - ST - ZIP	<b>JUPITER FL 33478</b>	4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	<b>D</b>
STREET ADDRESS		5.3 STREET ADDRESS	<b>William Orr</b>
CITY - ST - ZIP		5.4 CITY - ST - ZIP	<b>18846 SE Old Trail Drive, W.</b> <b>Jupiter, FL 33478</b>
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 (if changed, or by an attachment with an address).

SIGNATURE: *Bill King VP Old Trail Homeowners Assn* DATE **3/23/95**