

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18973

FILED
Jan 13, 2009
Secretary of State

Entity Name: COUNTRY TRAILS PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

5018 GREENBROOK LN
LAKELAND, FL 33811 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 5284
LAKELAND, FL 338075284 US

New Mailing Address:

FEI Number: 59-2760325

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELLIOTT, KAY
5018 GREENBROOK LN
LAKELAND, FL 33811 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FRIDRIKSSON, JON
Address: 10611 OVERLAND TR
City-St-Zip: POLK CITY, FL 33868

Title: DS () Delete
Name: HUGHES, SHARON
Address: 9304 BOB WHITE
City-St-Zip: POLK CITY, FL 33868

Title: D () Delete
Name: DOWNS, JOHN
Address: 10622 OVERLAOD TR
City-St-Zip: POLK CITY, FL 33868

Title: D () Delete
Name: STEDING, WILHEIM
Address: 10217 OLD SPANISH TR.
City-St-Zip: POLK CITY, FL 33868

Title: DV () Delete
Name: TEALGE, BRIAN
Address: 9305 BOB WHITE DR
City-St-Zip: POLK CITY, FL 33868

Title: PD () Delete
Name: MOSIER, JAMES
Address: 10229 OLD SPANISH TRAIL
City-St-Zip: POLK CITY, FL 33868

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: AMOS, JOE
Address: 3001 SANTA FE TRAIL
City-St-Zip: POLK CITY, FL 33868

Title: DS (X) Change () Addition
Name: GROTLER, ADELE
Address: 4129 WOODSRIDGE DR
City-St-Zip: POLK CITY, FL 33868

Title: DT (X) Change () Addition
Name: RIDDLE, MIKE
Address: 3349 SANTA FE TRAIL
City-St-Zip: POLK CITY, FL 33868

Title: D (X) Change () Addition
Name: HUGHES, SHARON
Address: 9304 BOB WHITE
City-St-Zip: POLK CITY, FL 33868

Title: DV (X) Change () Addition
Name: PATE, LARRY
Address: 4041 WOODSRIDGE DR
City-St-Zip: POLK CITY, FL 33868

Title: D (X) Change () Addition
Name: TEAGLE, BRIAN
Address: 9305 BOB WHITE DR
City-St-Zip: POLK CITY, FL 33868

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: JOE AMOS

DP

01/13/2009

Electronic Signature of Signing Officer or Director

Date