

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24023

FILED
Mar 23, 2009
Secretary of State

Entity Name: FLORIDA CRACKER TRAIL ASSOCIATION, INC.

Current Principal Place of Business:

1767 LAKEWOOD RANCH BLVD.
#187
BRADENTON, FL 34211 US

New Principal Place of Business:

Current Mailing Address:

1767 LAKEWOOD RANCH BLVD
#187
BRADENTON, FL 34211 US

New Mailing Address:

FEI Number: 59-2976309 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REED, DAVID
1767 LAKEWOOD RANCH BLVD
#187
BRADENTON, FL 34211 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: PD () Delete
Name: REED, DAVID
Address: 1767 LAKEWOOD RANCH BLVD, #187
City-St-Zip: BRADENTON, FL 34211

Title: VP () Delete
Name: MASENGALE, GEORGE
Address: 7765 121 AVENUE EAST
City-St-Zip: PARRISH, FL 33219

Title: SD () Delete
Name: JONES, MARIE
Address: 39451 TAYLOR RD
City-St-Zip: MYAKKA CITY, FL 34251

Title: TD () Delete
Name: LINDSEY, LINDA
Address: 12051 ORANGE AVE
City-St-Zip: FT PIERCE, FL 34945

Title: D () Delete
Name: MASSENGALE, GEORGE
Address: 7765 121ST AVE. EAST
City-St-Zip: PARRISH, FL 33219

Title: D () Delete
Name: WILLIAMSON, BONNIE
Address: 9444 S W 142ND ST
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: OSTERLING, JENNIFER
Address: P.O. BOX 462
City-St-Zip: MYAKKA CITY, FL 33219

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

Title: TD (X) Change () Addition
Name: HUNT, KATHY
Address: 3203 6TH AVENUE W.
City-St-Zip: PALMETTO, FL 34221

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: DAVID REED

PD

03/23/2009

Electronic Signature of Signing Officer or Director

Date