

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29229

FILED
Apr 24, 2009
Secretary of State

Entity Name: EAGLE TRACE AT BOOT RANCH HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2870 SCHERER DRIVE N.
SUITE 100
SAINT PETERSBURG, FL 33716 US

New Principal Place of Business:

Current Mailing Address:

2870 SCHERER DRIVE N.
SUITE 100
SAINT PETERSBURG, FL 33716 US

New Mailing Address:

FEI Number: 34-1615595

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRUDNY, MICHAEL J
200 N. PINE AVE STE A
CLEARWATER, FL 33761 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: MARGARIS, SPERO
Address: 1808 E TRACE BLVD
City-St-Zip: PALM HARBOR, FL 34685

Title: D () Delete
Name: SQUITERO, PAM
Address: 1823 EAGLE TRACE BLVD
City-St-Zip: PALM HARBOR, FL 34685

Title: D () Delete
Name: ELLIOT, VERONICA
Address: 1841 SPUR LANE
City-St-Zip: PALM HARBOR, FL 34685

Title: D () Delete
Name: GAVRON, MEL
Address: 1828 EAGLE TRACE BLVD
City-St-Zip: PALM HARBOR, FL 34685

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:

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: TODD R. PALMER

MGR

04/24/2009

Electronic Signature of Signing Officer or Director

Date