

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N32801

**FILED**  
**Apr 07, 2011**  
**Secretary of State**

**Entity Name:** SPLITRAIL HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

12026 NW 1ST LANE  
GAINESVILLE, FL 32607 US

**New Principal Place of Business:**

**Current Mailing Address:**

12026 NW 1ST LANE  
GAINESVILLE, FL 32607 US

**New Mailing Address:**

**FEI Number:** 59-3009571

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WALKER, MARK D  
12026 NW 1ST LANE  
GAINESVILLE, FL 32607 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  
Name: WALKER, MARK D  
Address: 12026 NW 1ST LANE  
City-St-Zip: GAINESVILLE, FL 32607

Title: VD  
Name: CAUCHON, MARC V  
Address: 12036 NW 1ST LANE  
City-St-Zip: GAINESVILLE, FL 32607

Title: SD  
Name: HUDSON, JUDITH B  
Address: 12047 NW 1ST LANE  
City-St-Zip: GAINESVILLE, FL 32607

Title: TD  
Name: SCOTT, STEVE W  
Address: 12016 NW 1ST LANE  
City-St-Zip: GAINESVILLE, FL 32607

Title: D  
Name: BRUSH, MATTHEW  
Address: 12125 NW 1ST LANE  
City-St-Zip: GAINESVILLE, FL 32607

I hereby 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 all other like empowered.

SIGNATURE: STEVE SCOTT

TD

04/07/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date