

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N35220

**FILED**  
**Jan 12, 2010**  
**Secretary of State**

**Entity Name:** BURNING TREE ESTATES HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

8614 BURNING TREE CIR.  
SEMINOLE, FL 3777 US

**New Principal Place of Business:**

8607 BURNING TREE CIR.  
SEMINOLE, FL 3777 US

**Current Mailing Address:**

8614 BURNING TREE CIR  
SEMINOLE, FL 33777 US

**New Mailing Address:**

**FEI Number:** 42-2668708      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

ELDER, THOMAS D  
8607 BURNING TREE CIRCLE  
SEMINOLE, FL 33777 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: MR  
Name: SCHMIDT, WAYNE  
Address: 8614 BURNING TREE CIRCLE  
City-St-Zip: SEMINOLE, FL 33777

Title: MR.  
Name: ELDER, THOMAS D  
Address: 8607 BURNING TREE CIR.  
City-St-Zip: SEMINOLE, FL 33777

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: THOMAS D. ELDER

TREA

01/12/2010

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

\_\_\_\_\_  
Date