

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47446

FILED
Apr 15, 2009
Secretary of State

Entity Name: CHEMONIE TRACE PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

13234 LAUREL HILL DR
TALLAHASSEE, FL 32309 US

New Principal Place of Business:

4084 FAIRHILL WAY
TALLAHASSEE, FL 32309 US

Current Mailing Address:

13234 LAUREL HILL DR
TALLAHASSEE, FL 32309 US

New Mailing Address:

4084 FAIRHILL WAY
TALLAHASSEE, FL 32309 US

FEI Number: 59-3154620

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NICKAS, WILLIAM N
13351 LAUREL HILL DR.
TALLAHASSEE, FL 32309 US

Name and Address of New Registered Agent:

ELDER, CHARLES R
4084 FAIRHILL WAY
TALLAHASSEE, FL 32309 US

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: CHARLES R ELDER

04/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SCOLES, WES
Address: 4462 WHISPERING OAKS DR
City-St-Zip: TALLAHASSEE, FL 32309

Title: T () Delete
Name: CRUTCHFIELD, LISA
Address: 4170 FAIRHILL WAY
City-St-Zip: TALLAHASSEE, FL 32309

Title: S () Delete
Name: NICKAS, WILLIAM N
Address: 13351 LAUREL HILL DR
City-St-Zip: TALLAHASSEE, FL 32309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: ELDER, CHARLES R
Address: 4084 FAIRHILL WAY
City-St-Zip: TALLAHASSEE, FL 32309

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: CHARLES R ELDER

SEC.

04/15/2009

Electronic Signature of Signing Officer or Director

Date