

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003875

FILED
Feb 07, 2012
Secretary of State

Entity Name: OZONA TRAIL COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

556 VISTA TRAIL CT
PALM HARBOR, FL 34683

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 276
OZONA, FL 34660

New Mailing Address:

FEI Number: 59-3203283

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COX, DEBORAH
556 VISTA TRAIL CT
PALM HARBOR, FL 34683 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: VP
Name: BRAUND, DAVID
Address: 548 VISTA TRAIL CT.
City-St-Zip: PALM HARBOR, FL 34683

Title: D
Name: KAY, HOLLY
Address: 568 VISTA TRAIL CT
City-St-Zip: PALM HARBOR, FL 34683

Title: D
Name: CONNER, JANET
Address: 564 VISTA TRAIL CT.
City-St-Zip: PALM HARBOR, FL 34683

Title: DST
Name: COX, DEBORAH
Address: 556 VISTA TRAIL CT.
City-St-Zip: PALM HARBOR, FL 34683

Title: P
Name: TATE, MARY
Address: 549 VISTA TRAIL CT
City-St-Zip: PALM HARBOR, FL 34683

Title: D
Name: SCOFIELD, JANET
Address: 540 VISTA TR CT
City-St-Zip: PALM HARBOR, FL 34683

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: DEBORAH COX

DST

02/07/2012

Electronic Signature of Signing Officer or Director

Date