2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2004
Secretary of State

DOCUMENT# N94000004794

Entity Name: BEN TALQUIN TRACE PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

19496 BEN TALQUIN TRACE
TALLAHASSEE, FL 32310

New Principal Place of Business:

Current Mailing Address:

19496 BEN TALQUIN TRACE
TALLAHASSEE, FL 32310

New Mailing Address:

FEI Number: 59-3310617 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCMILLAN, HOMER I
19497 BEN TALQUIN TRACE
TALLAHASSEE, FL 32310 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: MCMILLAN, HOMER I
Address: 19497 BEN TALQUIN TRACE
City-St-Zip: TALLAHASSEE, FL 32310

Title: VTD ( ) Delete
Name: HARRIS, JANE R
Address: 5004 VELDA DAIRY ROAD
City-St-Zip: TALLAHASSEE, FL 323096802

Title: SD ( ) Delete
Name: DONAWAY, ELIZABETH M
Address: 19496 BEN TALQUIN TRACE
City-St-Zip: TALLAHASSEE, FL 32310

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change ( ) Addition
Name: MCMILLAN, ERMA L
Address: 19496 BEN TALQUIN TRACE
City-St-Zip: TALLAHASSEE, FL 32310

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ERMA L. MCMILLAN SECY 03/08/2004

Electronic Signature of Signing Officer or Director — Date