

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000005265

**FILED**  
**Feb 17, 2004**  
**Secretary of State****Entity Name:** YEARLING TRACE PROPERTY OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**420 HOWARD AVENUE  
LAKELAND, FL 33815 US**New Principal Place of Business:**7094 TALL PINE RD.  
POLK CITY, FL 33868 US**Current Mailing Address:**420 HOWARD AVENUE  
LAKELAND, FL 33815 US**New Mailing Address:**7094 TALL PINE RD.  
POLK CITY, FL 33868 US**FEI Number:** 27-0073358**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**MUNSON, PETER J  
1501 S FLORIDA AVE  
LAKELAND, FL 33803 US**Name and Address of New Registered Agent:**BURCHAM, MARY A  
7094 TALL PINE RD.  
POLK CITY, FL 33868 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: MARY A. BURCHAM

02/17/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: PD ( ) Delete  
Name: ALBRITTON, E K  
Address: 420 HOWARD AVENUE  
City-St-Zip: LAKELAND, FL 33815Title: STD ( ) Delete  
Name: ALBRITTON, SUE P  
Address: 420 HOWARD AVENUE  
City-St-Zip: LAKELAND, FL 33815Title: VD ( ) Delete  
Name: EVANS, WILLIAM E  
Address: 420 HOWARD AVENUE  
City-St-Zip: LAKELAND, FL 33815Title: VD ( ) Delete  
Name: EVANS, JULIE P  
Address: 420 HOWARD AVENUE  
City-St-Zip: LAKELAND, FL 33815Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: PD (X) Change ( ) Addition  
Name: BURCHAM, MARY A MRS.  
Address: 7094 TALL PINE RD  
City-St-Zip: POLK CITY, FL 33868Title: SD (X) Change ( ) Addition  
Name: BITTENGLE, PAUL W MR.  
Address: 8538 DOUBLE ROCK RD  
City-St-Zip: POLK CITY, FL 33868Title: VD (X) Change ( ) Addition  
Name: ROBINSON, GERALD D MR.  
Address: 2116 TRAIL CUT RD  
City-St-Zip: POLK CITY, FL 33868Title: TD (X) Change ( ) Addition  
Name: CHRISTMAS, JOANN F MS.  
Address: 11975 BACKLAND PATH RD  
City-St-Zip: POLK CITY, FL 33868Title: D ( ) Change (X) Addition  
Name: DAWSON, MICHAEL W MR.  
Address: 6942 OAK BEND RD.  
City-St-Zip: POLK CITY, FL 33868

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: MARY A. BURCHAM

MRS.

02/17/2004

Electronic Signature of Signing Officer or Director

Date