

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005494

FILED  
Apr 13, 2011  
Secretary of State

**Entity Name:** TREVI HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

409 E. COLLEGE AVENUE  
RUSKIN, FL 33570

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 1058  
RUSKIN, FL 33575 US

**New Mailing Address:**

**FEI Number:** 59-3524640

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILSON, LOU ELLEN  
409 E COLLEGE AVENUE  
RUSKIN, FL 33570 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  
Name: BETTS, MARC  
Address: 13512 WESTSHIRE  
City-St-Zip: TAMPA, FL 33618

Title: VPD  
Name: WEIHMULLER, JOHN  
Address: 13502 WESTSHIRE DR  
City-St-Zip: TAMPA, FL 33618

Title: STD  
Name: CRAFT, JEFF  
Address: 13511 WESTSHIRE DR.  
City-St-Zip: TAMPA, FL 33618

Title: D  
Name: HORNELAND, KNUT  
Address: PO BOX 47628  
City-St-Zip: TAMPA, FL 33647

Title: D  
Name: WILKERSON, GREG  
Address: 13514 WESTSHIRE DRIVE  
City-St-Zip: TAMPA, FL 33618

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: MARC BETTS

DP

04/13/2011

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

\_\_\_\_\_  
Date