

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001592

FILED
Apr 26, 2007
Secretary of State

Entity Name: FLORIDA FOX TROTTER ASSOCIATION, INC.

Current Principal Place of Business:

3925 MOORES LAKE ROAD
DOVER, FL 33527

New Principal Place of Business:

18314 LITHIA RANCH RD
LITHIA, FL 33547

Current Mailing Address:

3925 MOORES LAKE ROAD
DOVER, FL 33527

New Mailing Address:

18314 LITHIA RANCH RD
LITHIA, FL 33547

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHIRLEY, CAROL
3925 MOORES LAKE ROAD
DOVER, FL 33527 US

Name and Address of New Registered Agent:

SHIRLEY, CAROL
18314 LITHIA RANCH RD
LITHIA, FL 33547 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: _____

04/26/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WOODWARD, JIM
Address: 4750 BLUE HERON
City-St-Zip: DE LEON SPRINGS, FL 32130

Title: VP () Delete
Name: BUD, BLANKENSHIP
Address: 7783 SADDLE CREEK TRAIL
City-St-Zip: SARASOTA, FL 34241 US

Title: S () Delete
Name: SHIRLEY, CAROL
Address: 3925 MOORES LAKE ROAD
City-St-Zip: DOVER, FL 33527 US

Title: T () Delete
Name: JUDY, CLONINGER
Address: 2077 WEST LAKE HAMILTON DRIVE
City-St-Zip: WINTER HAVEN, FL 33881

Title: D () Delete
Name: PASCHAL, LINDA
Address: 12345 PARRISH CEMETERY RD
City-St-Zip: PARRISH, FL 34127 US

Title: D () Delete
Name: BALYEAT, LINDA
Address: 9049 S. EVANS AVENUE
City-St-Zip: INVERNESS, FL 34452 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: CAROL SHIRLEY

S

04/26/2007

Electronic Signature of Signing Officer or Director

Date