

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006447

FILED  
Feb 08, 2012  
Secretary of State

**Entity Name:** ADDISON TRACE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

2801 NORTH UNIVERSITY DRIVE  
CORAL SPRINGS, FL 33065

**New Principal Place of Business:**

**Current Mailing Address:**

2801 NORTH UNIVERSITY DRIVE  
SUITE 204  
CORAL SPRINGS, FL 33065

**New Mailing Address:**

**FEI Number:** 65-0704746

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LIPPMAN, KAREN  
2801 NORTH UNIVERSITY DRIVE  
SUITE 204  
CORAL SPRINGS, FL 33065 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: P  
Name: MUNIZ, MICHAEL H  
Address: 5540 VIA DE LA PLATA CIR  
City-St-Zip: DELRAY BEACH, FL 33484

Title: TD  
Name: GREEN, KERRY  
Address: 5851 VIA DE LA PLATA CIRCLE  
City-St-Zip: DELRAY BEACH, FL 33484

Title: S  
Name: SCHLEIDER, MARSHA  
Address: 5636 VIA DE LA PLATA CIRCLE  
City-St-Zip: DELRAY BEACH, FL 33484

Title: VP  
Name: FENNIMORE, VINNIE  
Address: 5629 VIA DE LA PLATA  
City-St-Zip: DELRAY BEACH, FL 33484

Title: D  
Name: FEINBERG, SHAYNA  
Address: 5792 VIA DE LA PLATA  
City-St-Zip: DELRAY BEACH, FL 33484

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: MICHAEL MUNIZ

PRES

02/08/2012

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

\_\_\_\_\_  
Date