

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001545

FILED  
Feb 24, 2009  
Secretary of State

Entity Name: PADDOCK TRAIL HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

VANGUARD MANAGEMENT  
9300 N 16TH ST  
TAMPA, FL 33612 US

**New Principal Place of Business:**

**Current Mailing Address:**

VANGUARD MANAGEMENT  
9300 N 16TH ST  
TAMPA, FL 33612 US

**New Mailing Address:**

FEI Number: 59-3448104

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WINFIELD, JANET  
9300 N 16TH ST  
TAMPA, FL 33612 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: WOZNICKI, LARRY JR  
Address: 9300 NORTH 16TH ST.  
City-St-Zip: TAMPA, FL 33612

Title: D ( ) Delete  
Name: MARTINEZ, ORLANDO  
Address: 9300 NORTH 16TH ST.  
City-St-Zip: TAMPA, FL 33612

Title: S ( ) Delete  
Name: SLYWKA, ANDREW  
Address: 9300 NORTH 16TH ST.  
City-St-Zip: TAMPA, FL 33612

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: SLYWKA, ANDREW  
Address: 9300 NORTH 16TH ST.  
City-St-Zip: TAMPA, FL 33612

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

Title: S (X) Change ( ) Addition  
Name: COLLINS, THOMAS  
Address: 9300 NORTH 16TH ST.  
City-St-Zip: TAMPA, FL 33612

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: JANET WINFIELD

AGEN

02/24/2009

Electronic Signature of Signing Officer or Director

Date