2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N97000001634

Entity Name

TRAILS END PROPERTY OWNERS ASSOCIATION, INC.



FILED Jan 31, 2008 08:00 AN Secretary of State

Principal Place of Business

5615 23RD ST SW VERO BEACH, FL 32968 Mailing Address

5615 23RD ST SW VERO BEACH, FL 32968



DO NOT WRITE IN THIS SPACE

01052008 No Chg-NP

CR2E037 (4/06)

4. FEI Number 65-0822495 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NUTBROWIN, JOHN W 5615 23RD ST SW VERO BEACH, FL 32968

SIGNATURE:

DO NOT WRITE IN THIS SPACE

8. 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. Fam familiar with, and accept the obligations of registered agent. SIGNATURE					
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
	Filing Fee is \$61.25 Due by May 1, 2008	Election Campaign Financ Trust Fund Contribution.	ing 🗆	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRE	CTORS			<u> </u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KING, KYLE B 1685 44TH AVE VERO BEACH, FL 32966				U00000810154 02/08/08-80011-026 61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DUNLEAVY, LEIGHANN 5635 23RD STREET VERO BEACH, FL 32963				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD NUTBROWIN, JOHN W 5615 23RD ST SW VERO BEACH, FL 32968			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			٠.	IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. If further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 seport as required by Chapter 617, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like of powered.					