

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003207

FILED
Apr 20, 2011
Secretary of State

Entity Name: FLORIDA TRAIL BLAZERS INC.

Current Principal Place of Business:

5322 EFFIE DR
APOPKA, FL 32712 US

New Principal Place of Business:

Current Mailing Address:

5322 EFFIE DR
APOPKA, FL 32712 US

New Mailing Address:

FEI Number: 59-3407626

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EMMONS, BETH A
5322 EFFIE DRIVE
APOPKA, FL 32712 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: TD
Name: EMMONS, BETH A
Address: 5322 EFFIE DRIVE
City-St-Zip: APOPKA, FL 32712 US

Title: VD
Name: CAPPS, CLARA
Address: 927 CLIFTON RD
City-St-Zip: DELEON SPRINGS, FL 32130

Title: D
Name: ARNOLD, EVERETT
Address: 25438 LIBBY LANE
City-St-Zip: EUSTIS, FL 32736

Title: PD
Name: DEARDORFF, DEBBY
Address: 3468 KILBEE ST
City-St-Zip: MIMS, FL 32754

Title: SD
Name: HALL, DEBRA
Address: 3476 KILBEE STREET
City-St-Zip: MIMS, FL 32754

Title: D
Name: COTO, ROLANDO
Address: 245 COUNTRY CIRCLE DR. , E
City-St-Zip: PORT ORANGE, FL 32128

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: BETH EMMONS

TD

04/20/2011

Electronic Signature of Signing Officer or Director

Date