## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N97000005993

FILED Jan 17, 2007 Secretary of State

Entity Name: PLANTATION TRACE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

780 NW 132ND AVE PLANTATION, FL 33325

Current Mailing Address: New Mailing Address:

780 NW 132ND AVE PLANTATION, FL 33325

FEI Number: 65-0818202 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

DAVIS, KATHLEEN 780 NW 132ND AVE PLANTATION, FL 33325 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:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: DP ( ) Delete Title: PR (X) Change ( ) Addition

 Name:
 DAVIS, KATHLEEN
 Name:
 DAVIS, KATHLEEN

 Address:
 780 NW 132ND AVE
 Address:
 780 NW 132ND AVE

 City-St-Zip:
 PLANTATION, FL 33325
 City-St-Zip:
 PLANTATION, FL 33325

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 GOLD, MICHAEL
 Name:

 Address:
 13206 NW 7TH PLACE
 Address:

 City-St-Zip:
 PLANTATION, FL 33325
 City-St-Zip:

 Name:
 ATTERBERRY, ERNEST
 Name:
 ATTERBERRY, ERNEST

 Address:
 768 NW 132ND AVE
 Address:
 768 NW 132ND AVE

 City-St-Zip:
 PLANTATION, FL
 City-St-Zip:
 PLANTATION, FL
 33325

Title: VPD ( ) Delete Title: VPD (X) Change ( ) Addition

 Name:
 ANIFANTIS, RITA
 Name:
 RUESS, PAUL

 Address:
 13211 NW 7 PLACE
 Address:
 13215 NW 7 PLACE

 City-St-Zip:
 PLANTATION, FL
 City-St-Zip:
 PLANTATION, FL
 33325

Title: SD () Delete Title: () Change () Addition

 Name:
 BARBOUR, CAROL
 Name:

 Address:
 756 NW 132ND AVENUE
 Address:

 City-St-Zip:
 PLANTATION, FL 33325
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: KATHLEEN DAVIS MS. 01/17/2007