

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003034

FILED
Jan 21, 2009
Secretary of State

Entity Name: OCEAN TRACE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

312 S OCEAN TRACE RD
ST. AUGUSTINE, FL 32080

New Principal Place of Business:

313 S. OCEAN TRACE RD
ST. AUGUSTINE, FL 32080

Current Mailing Address:

PO BOX 840008
ST. AUGUSTINE, FL 32080

New Mailing Address:

FEI Number: 59-3532815 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARLITA, LIKE
231 N. OCEAN TRALE RD.
ST AUGUSTINE, FL 32080 US

Name and Address of New Registered Agent:

JEROME, MINNICKS J TREAS.
313 S OCEAN TRACE RD.
ST AUGUSTINE, FL 32080 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: JEROME J. MINNICKS

01/21/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HOFFMAN, TINA
Address: 302 SOUTH OCEAN TRUCE RD.
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: P () Delete
Name: MINNICKS, JERRY
Address: 313 S OCEAN TRACE RD
City-St-Zip: ST AUGUSTINE, FL 32080

Title: VP () Delete
Name: CONNOR, JACK
Address: 412 OCEAN BREEZE LANE
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: S () Delete
Name: HARE, GARY
Address: 214 NORTH OCEAN TRALE RD.
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: T () Delete
Name: LIKE, ARLITA
Address: 231 N OCEAN TRACE RD
City-St-Zip: ST. AUGUSTINE, FL 32080

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SEC. (X) Change () Addition
Name: HOFFMAN, TINA SEC.
Address: 302 SOUTH OCEAN TRUCE RD.
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: TREA (X) Change () Addition
Name: MINNICKS, JEROME TREAS.
Address: 313 S. OCEAN TRACE RD
City-St-Zip: ST AUGUSTINE, FL 32080

Title: VP (X) Change () Addition
Name: CONNOR, JACK V.P.
Address: 412 OCEAN BREEZE LANE
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: PRES (X) Change () Addition
Name: KLINGE, PETER PRES.
Address: 408 OCEAN BREEZE LANE
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: M/L (X) Change () Addition
Name: HELMLY, NOEL M/L
Address: 228 N. OCEAN TRACE RD
City-St-Zip: ST. AUGUSTINE, FL 32080

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: JEROME J. MINNICKS

TREA

01/21/2009

Electronic Signature of Signing Officer or Director

Date