

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Dec 16, 2011
Secretary of State

DOCUMENT# N98000004800

Entity Name: BARTRAM TRAIL HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**SIGNATURE REALTY & MGMT.
4003 HARTLEY RD.
JACKSONVILLE, FL 32257**New Principal Place of Business:**475 WEST TOWN PLACE
SUITE 200
ST. AUGUSTINE, FL 32092**Current Mailing Address:**SIGNATURE REALTY & MGMT.
4003 HARTLEY RD.
JACKSONVILLE, FL 32257**New Mailing Address:**475 WEST TOWN PLACE
SUITE 200
ST. AUGUSTINE, FL 32092**FEI Number:** 59-3531802**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CANTRELL, BRYAN
4003 HARTLEY RD
JACKSONVILLE, FL 32257 US**Name and Address of New Registered Agent:**SEVERN TRENT SERVICES
475 WEST TOWN PLACE
SUITE 200
ST. AUGUSTINE, FL 32092 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: SEVERN TRENT SERVICES

12/16/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: FALES, JULIE
Address: 412 KENTUCK BRANCH LANE
City-St-Zip: ST JOHNS, FL 32259

Title: T
Name: BLOUNT, JOHN W
Address: 253 N BARTRAM TRAIL
City-St-Zip: ST JOHNS, FL 32259

Title: D
Name: LOVELL, KATHLEEN
Address: 260 N BARTRAM TRAIL
City-St-Zip: ST JOHNS, FL 32259

Title: D
Name: DRISKELL, GREGORY
Address: 309 S BARTRAM TRAIL
City-St-Zip: ST JOHNS, FL 32259

Title: D
Name: SPANER, JOESPH
Address: 233 N BARTRAM TRAIL
City-St-Zip: ST JOHNS, FL 32259

Title: D
Name: BOULWARE, ROBERT
Address: 317 S BARTRAM TRIL
City-St-Zip: ST JOHNS, FL 32259

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: JULIE FALES

P

12/16/2011

Electronic Signature of Signing Officer or Director

Date