2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2007
Secretary of State

DOCUMENT# N99000004054

Entity Name: BOBCAT TRAIL HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST STATE RD. 434
SUITE 5000
LONGWOOD, FL 327795044

New Principal Place of Business:

Current Mailing Address:

2180 WEST STATE RD. 434
SUITE 5000
LONGWOOD, FL 327795044

New Mailing Address:

FEI Number: 59-3593925 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HART, JAMES W JR.
2180 W SR 434
SUITE 5000
LONGWOOD, FL 327795044 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: P ( ) Delete
Name: LANGE, GERRY
Address: 23081 HARBORVIEW RD
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: VP ( ) Delete
Name: DUNN, BOB
Address: 1676 PALMETTO PALM WAY
City-St-Zip: NORTH PORT, FL 34288

Title: T ( ) Delete
Name: TOKARZ, CHARLIE
Address: 7419 39TH CT E
City-St-Zip: SARASOTA, FL 34243

Title: D ( ) Delete
Name: TAYLOR, STEVEN
Address: 2620 ROYAL PALM DR
City-St-Zip: NORTH PORT, FL 34288

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: MILLS, JOHN
Address: 3139 ROYAL PALM DR
City-St-Zip: NORT PORT, FL 34288

Title: VPD (X) Change ( ) Addition
Name: MILOSIC, MICHAEL
Address: 2121 SILVER PALM RD
City-St-Zip: NORTH PORT, FL 34288

Title: SD (X) Change ( ) Addition
Name: GIROUX, ROGER
Address: 1926 SILVER PALM RD
City-St-Zip: NORTH PORT, FL 34288

Title: TD (X) Change ( ) Addition
Name: SMITH, STEVE
Address: 1827 SILVER PALM RD
City-St-Zip: NORTH PORT, FL 34288

Title: D ( ) Change (X) Addition
Name: TOKARZ, CHARLIE
Address: 2212 58TH AVE E
City-St-Zip: BRADENTON, FL 34203

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: JOHN MILLS PD 04/05/2007

Electronic Signature of Signing Officer or Director — Date