

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000005859

**FILED**  
**Apr 12, 2011**  
**Secretary of State**

**Entity Name:** TRADITIONS COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

7300 PARK STREET  
SEMINOLE, FL 33777

**New Principal Place of Business:**

**Current Mailing Address:**

7300 PARK STREET  
SEMINOLE, FL 33777

**New Mailing Address:**

**FEI Number:** 59-3656478

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

REINHARDT, DEBRA  
7300 PARK STREET  
SEMINOLE, FL 33777 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:** PD  
**Name:** KOYUTIS, BILL  
**Address:** 8094 COTTONWOOD COURT  
**City-St-Zip:** SEMINOLE, FL 33776

**Title:** SD  
**Name:** HUNT, ANGELA  
**Address:** 8092 WILLOW COURT  
**City-St-Zip:** SEMINOLE, FL 33776 US

**Title:** VDP  
**Name:** DAVIS, MICHELE  
**Address:** 13663 HERITAGE DRIVE  
**City-St-Zip:** SEMINOLE, FL 33776 US

**Title:** D  
**Name:** MEROLA, VICKI  
**Address:** 13549 HERITAGE DRIVE  
**City-St-Zip:** SEMINOLE, FL 33776 US

**Title:** TD  
**Name:** RODRIGUEZ, CARLOS  
**Address:** 8071 COTTONWOOD COURT  
**City-St-Zip:** SEMINOLE, FL 33776

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:** BILL KOYUTIS

PRES

04/12/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date