

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000131933

Entity Name: MAGNOLIA TRACE, INC.

FILED  
Mar 20, 2007  
Secretary of State

## Current Principal Place of Business:

5824 23RD ST  
ZEPHYRHILLS, FL 33542

## New Principal Place of Business:

## Current Mailing Address:

36754 FAIRVIEW HEIGHTS RD.  
ZEPHYRHILLS, FL 33541

## New Mailing Address:

5824 23RD STREET  
ZEPHYRHILLS, FL 33542

FEI Number: 20-3551323

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BILL, CHRISTOPHER D.  
36754 FAIRVIEW HEIGHTS RD.  
ZEPHYRHILLS, FL 33541 US

## Name and Address of New Registered Agent:

BILL, CHRISTOPHER D.  
5824 23RD STREET  
ZEPHYRHILLS, FL 33542 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: CHRISTOPHER BILL

03/20/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: SMITH, HOWARD D.  
Address: 36754 FAIRVIEW HEIGHTS RD.  
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: DST ( ) Delete  
Name: BILL, CHRISTOPHER D.  
Address: 36754 FAIRVIEW HEIGHTS RD.  
City-St-Zip: ZEPHYRHILLS, FL 33541

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: SMITH, HOWARD D.  
Address: 5824 23RD STREET  
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: DST (X) Change ( ) Addition  
Name: BILL, CHRISTOPHER D.  
Address: 5824 23RD STREET  
City-St-Zip: ZEPHYRHILLS, FL 33542

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTOPHER BILL

DST

03/20/2007

Electronic Signature of Signing Officer or Director

Date