2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000046501

Entity Name: TRUXELL HOMEOWNER'S ASSOCIATION, INC.

US

FILED Apr 25, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

209 G. O. WILLIS RD. SOPCHOPPY, FL 32358

Current Mailing Address: New Mailing Address:

PO BOX 1057 PO BOX 148

PANACEA, FL 32346 US SOPCHOPPY, FL 32358 US

FEI Number: 59-3526120 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WILLIAMSON, TIM

209 G. O. WILLIS RD.

SOPCHOPPY, FL 32358 US

WILLIAMSON, KAY

209 G. O. WILLIS RD.

SOPCHOPPY, FL 32358 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: KAY WILLIAMSON 04/25/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 WILLIAMSON, TIM
 Name:
 WILLIAMSON, KAY

 Address:
 209 G.O. WILLIS RD.
 Address:
 209 G.O. WILLIS RD.

 City-St-Zip:
 SOPCHOPPY, FL 32358
 City-St-Zip:
 SOPCHOPPY, FL 32358

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KAY WILLIAMSON PRES 04/25/2005