

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P98000081033

Entity Name: EAGLE TRACE PROPERTIES, INC.

FILED
Aug 06, 2008
Secretary of State

Current Principal Place of Business:

11800 LAKEVIEW DR.
CORAL SPRINGS, FL 33071

New Principal Place of Business:

Current Mailing Address:

11800 LAKEVIEW DR.
CORAL SPRINGS, FL 33071

New Mailing Address:

FEI Number: 65-0866920

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HORSKEY, BARBARA
11800 LAKEVIEW DR.
CORAL SPRINGS, FL 33071 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: HORSKEY, BARBARA
Address: 11800 LAKEVIEW DRIVE
City-St-Zip: CORAL SPRINGS, FL 33071

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FAZIO, KATHERINE
Address: 11800 LAKEVIEW DRIVE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: D () Change (X) Addition
Name: FAZIO, MARIO
Address: 11800 LAKEVIEW DRIVE
City-St-Zip: CORAL SPRINGS, FL 33071

I hereby certify that the information supplied with this filing does not qualify 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: KATHERINE FAZIO

P

08/06/2008

Electronic Signature of Signing Officer or Director

Date