

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000005494

**FILED  
Mar 31, 2015  
Secretary of State  
CC5269135656**

**Entity Name:** TREVI HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

409 E. COLLEGE AVENUE  
RUSKIN, FL 33570

**Current Mailing Address:**

P O BOX 1058  
RUSKIN, FL 33575 US

**FEI Number: 59-3524640**

**Certificate of Status Desired: No**

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

WILSON, LOU ELLEN  
409 E COLLEGE AVENUE  
RUSKIN, FL 33570 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title	DVP	Title	DIRECTOR
Name	WEIHMULLER, JOHN	Name	COTTON, RYAN
Address	13502 WESTSHIRE DR	Address	13516 WESTSHIRE DRIVE
City-State-Zip:	TAMPA FL 33618	City-State-Zip:	TAMPA FL 33618
Title	SECRETARY, TREASURER	Title	TREASURER
Name	HARKINS, ALEX	Name	HOLLISTER, KEVIN
Address	13530 WESTSHIRE DRIVE	Address	13506 WESTSHIRE DRIVE
City-State-Zip:	TAMPA FL 33618	City-State-Zip:	TAMPA FL 33618

*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: JOHN WEIHMULLER**

**VICE PRESIDENT**

**03/31/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date