

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743549

FILED  
Mar 09, 2010  
Secretary of State

**Entity Name:** CARROLLWOOD VILLAGE PHASE II HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4131 GUNN HWY  
TAMPA, FL 33618

**New Principal Place of Business:**

**Current Mailing Address:**

4131 GUNN HWY  
TAMPA, FL 33618

**New Mailing Address:**

FEI Number: 59-1977418

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TANKEL, ROBERT L  
1022 MAIN ST  
STE D  
DUNEDIN, FL 34698 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: VP  
Name: MCLAURIN, RICHARD  
Address: 4131 GUNN HWY  
City-St-Zip: TAMPA, FL 33618

Title: D  
Name: POWERS, MICHAEL  
Address: 4131 GUNN HWY  
City-St-Zip: TAMPA, FL 33618

Title: D  
Name: CORNELL, DOUG  
Address: 4131 GUNN HWY  
City-St-Zip: TAMPA, FL 33618

Title: TD  
Name: HANSON, JOSEPH  
Address: 4131 GUNN HWY  
City-St-Zip: TAMPA, FL 33618

Title: P  
Name: SAVIET, ELWIN  
Address: 4131 GUNN HWY  
City-St-Zip: TAMPA, FL 33618

Title: S  
Name: CROUSE, JAMES  
Address: 4131 GUNN HWY  
City-St-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: ELWIN SAVIET

P

03/09/2010

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

\_\_\_\_\_  
Date