

FILE NOW: FILING FEE AFTER MAY 1 IS \$125.00

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Morfitt Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 758202 (6)

1. Corporation Name

THE VILLAGE AT TIERRA VERDE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

P.O. BOX 12700
ST. PETERSBURG FL 33733

P.O. BOX 12700
ST. PETERSBURG FL 33733

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/29/1981	3a. Date of Last Report 04/06/1994
4. FEI Number 59-2152764	Applied For ☐ Not Applicable

2. Principal Place of Business 21 114 PINELLAS BAYWAY Suite, Apt. #, etc.	2a. Mailing Address 26 114 PINELLAS BAYWAY Suite, Apt. #, etc.
22 City & State TIERRA VERDE, FL	27 City & State TIERRA VERDE, FL
23 Zip 33715	28 Country PINELLAS
24 33715	25 PINELLAS
29 33715	30 PINELLAS

5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WAGNER, CAROLYN S.
PLAZA 300 EAST SUITE 125
300-31ST ST NORTH
ST. PETERSBURG FL 33713**

81 Name DOROTHY THOMAS
82 Street Address (P.O. Box Number is Not Acceptable) 114 PINELLAS BAYWAY
83
84 City TIERRA VERDE
85 Zip Code FL 33715

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE *Dorothy Thomas* **4/26/95**

Signature, typed or printed name of registered agent and fee applicator

(NOTE: Registered Agent signature required when submitting)

12. OFFICERS AND DIRECTORS	
TITLE	PD-
NAME	BURLEY, GEORGE
STREET ADDRESS	120 1ST ST. E #102
CITY, ST, ZIP	TIERRA VERDE FL
TITLE	SD
NAME	LYONS, ALICE
STREET ADDRESS	131 1ST ST E #301
CITY, ST, ZIP	TIERRA VERDE FL
TITLE	VD-
NAME	SILVIO, JOSEPH
STREET ADDRESS	121-1 ST ST. E
CITY, ST, ZIP	TIERRA VERDE FL
TITLE	D-
NAME	HAZEL, MICHAEL
STREET ADDRESS	120-1ST ST E #104
CITY, ST, ZIP	TIERRA VERDE FL
TITLE	TD
NAME	TRUHOL, ERIC
STREET ADDRESS	138 FIRST ST EAST #302
CITY, ST, ZIP	TIERRA VERDE FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	P/D ☒ Change ☐ Addition
12 NAME	HAZEL, P. MICHAEL
13 STREET ADDRESS	126 FIRST STREET EAST #104
14 CITY, ST, ZIP	TIERRA VERDE, FL 33715
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY, ST, ZIP	
31 TITLE	VP/D ☒ Change ☐ Addition
32 NAME	TRUHOL, ERIC
33 STREET ADDRESS	138 FIRST STREET EAST #302
34 CITY, ST, ZIP	TIERRA VERDE, FL 33715
41 TITLE	D ☒ Change ☐ Addition
42 NAME	THOMSEN, JOHN
43 STREET ADDRESS	103 FIRST STREET EAST #204
44 CITY, ST, ZIP	TIERRA VERDE, FL 33715
51 TITLE	T/D ☒ Change ☐ Addition
52 NAME	MARTINO, DOMINICK
53 STREET ADDRESS	138 FIRST STREET EAST #307
54 CITY, ST, ZIP	TIERRA VERDE, FL 33715
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13, unchanged, or on an attachment with an addressee.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

P. Michael Hazel **4/26/94** **84A-0029**