2005 NOT-FOR-PROFIT CORPORATION

FILED Mar 16, 2005 8:00 am Secretary of State 03-16-2005 90028 050 ****61.25 **ANNUAL REPORT** 4 THE 520

DOCUMENT # N0200007612 1. Entity Name TESORO PRESERVE PROPERTY OWNERS' ASSOCIATION, INC.						03-16-200	05 90028 (050 ****6	1.25
Principal Place of Business Mailing Address 3228 SW MARTIN DOWNS BLVD. 3228 SW MARTIN DOWNS B STE 5 STE 5 PALM CITY, FL 34990 PALM CITY, FL 34990),	1100/2010		110 HW HW 10 TO TO A	REIT EIITI MAIR M	01101 1 1 1301
·		3. Mailing Address	. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			03112005	Chg-NP	CR2E	337 (10/03)	
City & State		City & State			4. FEI Number 01-075				oplied For ot Applicable
Zip	Country	Zip	Cou	ntry		of Status Desired		\$8.75 Add Fee Require	
<u> </u>	6. Name and Address of Current Re	egistered Agent		Name	7. Name and	Address of Nev	w Registered	Agent	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				Street Address (P.O. Box Number is Not Acceptable)					
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				City	FL Zip Code				
8. 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. I am familiar with, and accept the obligations of registered agent.									
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
	··		go	- regiona originator	are recommend when removable (g)				
	Filing Fee is \$61.25 Due by May 1, 2005	9. Election Car Trust Fund (mpaign Fi	nancing	\$5.00 May B Added to Fees	e	Make chec lorida Depa	k payable t	tate
10.	Due by May 1, 2005 OFFICERS AND DIRECT	9. Election Car Trust Fund (mpaign Fi Contribution	inancing on.	\$5.00 May B		Make chec lorida Depa	IRECTORS IN	tate
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I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TOE CROCKER

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