

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2009
Secretary of State

DOCUMENT# N02000007612

Entity Name: TESORO PRESERVE PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

31 LUPI COURT SUITE 230
PALM COAST, FL 32137

New Principal Place of Business:

31 LUPI COURT
230
PALM COAST, FL 32137

Current Mailing Address:

31 LUPI COURT SUITE 230
PALM COAST, FL 32137

New Mailing Address:

31 LUPI COURT
230
PALM COAST, FL 32137

FEI Number: 01-0750948

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GINN PROPERTY MANAGEMENT, LLC
31 LUPI CT SUITE 230
ATTN: MELISSA SHANE
PALM COAST, FL 32137 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: PD () Delete
Name: BEAM, BILL
Address: 1 HAMMOCK BEACH PARKWAY
City-St-Zip: PALM COAST, FL 32137

Title: V () Delete
Name: LACUSKY, BRIAN
Address: 125 SE VIA TESORO BLVD
City-St-Zip: PORT ST LUCIE, FL 34984

Title: TD () Delete
Name: NEAL, ELIZABETH
Address: 31 LUPI CT SUITE 150
City-St-Zip: PALM COAST, FL 32137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BEAM, BILL
Address: 31 LUPI COURT SUITE 230
City-St-Zip: PALM COAST, FL 32137

Title: VP (X) Change () Addition
Name: LACUSKY, BRIAN
Address: 125 SE VIA TESORO BLVD
City-St-Zip: PORT ST LUCIE, FL 34984

Title: ST (X) Change () Addition
Name: NEAL, ELIZABETH
Address: 31 LUPI CT SUITE 230
City-St-Zip: PALM COAST, FL 32137

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MELISSA SHANE

VP

01/07/2009

Electronic Signature of Signing Officer or Director

Date