

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED**  
**Aug 05, 2009**  
**Secretary of State**

DOCUMENT# N02000007612

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

**Current Principal Place of Business:**

1 HAMMOCK BEACH PARKWAY  
PALM COAST, FL 32137

**New Principal Place of Business:**

**Current Mailing Address:**

1 HAMMOCK BEACH PARKWAY  
PALM COAST, FL 32137

**New Mailing Address:**

**FEI Number:** 90-0262911      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

GINN PROPERTY MANAGEMENT, LLC  
1 HAMMOCK BEACH PARKWAY  
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: VP ( ) Delete  
Name: LACUSKY, BRIAN  
Address: 125 SE VIA TESORO BLVD  
City-St-Zip: PORT ST LUCIE, FL 34984

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: GRAY, JOHN  
Address: 1 HAMMOCK BEACH PARKWAY  
City-St-Zip: PALM COAST, FL 32137

Title: VP (X) Change ( ) Addition  
Name: PAWLIKOWSKI, MARTY  
Address: 1 HAMMOCK BEACH PKWY  
City-St-Zip: PALM COAST, FL 32137

Title: S/T ( ) Change (X) Addition  
Name: ZEIGLER, RALPH  
Address: 1 HAMMOCK BEACH PKWY  
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: JOHN GRAY

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

P

08/05/2009

\_\_\_\_\_ Date