2000 UNIFORM BUSINESS REPORT (UBR) FILED Feb 29, 2000 8:00 am Secretary of State **DOCUMENT # N08292** 1. Entity Name TALL PINES COMMUNITY ASSOCIATION, INC. 02-29-2000 90140 023 ****61.25 Principal Place of Business Mailing Address 1050A E LAKE WOODLANDS 1050A E LAKE WOODLANDS OLDSMAR FL 34677 **OLDSMAR FL 34677-2328** O I U I I U US 2. Principal Place of Business 3. Mailing Address 2753 STATE ROAD 580 2753 STATE ROAD 580 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE #207 #207 City & State City & State 4. FEI Number Applied For CLEARWATER FL 59-2722574 CLEARWATER FL Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 33761 33761 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MAUREEN C. REARDON mber is Not Acceptable) ROAD 580 #207 SCANNAVINO, D 3490 E LAKE RD STE C City PALM HARBOR FL 34685 Zig Code 33761 **CLEARWATER** 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. 1-26-00 (NOTE: Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. **FEE IS \$61.25** Added to Fees Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. X Delete D TITLE Addition ELLIS. DAVIS NAME HILL, GEORGE 7612 TOLAR DRIVE 10800 LAQUINTA DR STREET ADDRESS ST ZIP CITY-ST-ZIP NEW PORT RICHEY FL 34654 NEW PORT RICHEY FL 34654 **K** Delete TITLE □ Change Addition T/D CHASSEY, JOANNE NAME CASSIDY, LLOYD 7326 BAKTURSOL DR STREET ADDRESS 10904 BROOKHAVEN DRIVE ST-ZIP CITY-ST-ZIP NEW PORT RICHEY FL 34654 NEW PORT RICHEY FL 34654 ☐ Delete TITLE ☐ Change Addition Addition P/D BERKLEY, GLADYS NAME HASSIGAN, NANCY 7707 ROCKVILLE COURT STREET ADDRESS 10347 PINENEEDLES DR ST-ZIP CITY-ST-ZIP NEW PORT RICHEY FL 34654 NEW PORT RICHEY FL 34654 IJ Delete V/D TITLE ☐ Change Addition CRAWLWY, ROSEMARY NAME LUBRANO, JAMES 10815 CHENEQUA CT STREET ADDRESS 10417 PINENEEDLES DRIVE #5 ST-ZIP CITY-ST-ZIP **NEW PORT RICHEY FL 34654** NEW PORT RICHEY FL 34654 D ☐ Delete TITLE ☐ Change Addition abate, Micki NAME ALVOREGE 7638 HAIGE CT STREET ADDRESS ST-ZIP CITY-ST-ZIP **NEW PORT RICHEY FL 34654 ∑** Delete [Addition TITLE ☐ Change BARBOUR, FRANK NAME 17526 VALE LOOP STREET ADDRESS ST-ZIP NEW PORT RICHEY FL 34654 CITY-ST-7IP 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 AND TYPED OR PRINTED NAME OF SIGNATURE AND TYPED OR PRINTED NAME OF SIGNANG OFFICER OR DIRECTOR ATURE: Daytime Phone # CR2E037