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Apr 07 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # ~~8513~~ (6) N08513
1. Corporation Name
Tarpon Landings Homeowners Association, Inc.

Principal Place of Business Mailing Address

2. Principal Place of Business 2a. Mailing Address
21 2100 Tarpon Landings Dr. 26 8211 State Rd. 52
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 City & State 27 City & State
23 Tarpon Springs, FL 28 Hudson, FL
Zip Country Zip Country
24 34689 25 USA 29 34667 30 USA

3. Date Incorporated or Qualified
04/03/85
4. FEI Number
59-2669060 Applied For Not Applicable
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. Is this nonprofit corporation a homeowners association? Yes No
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30 Yes No

9. Name and Address of Current Registered Agent
C.G. Glinski
2110 Tarpon Landings Dr.
Tarpon Springs, FL 34689

10. Name and Address of New Registered Agent
81 Name Edward W. Pianka
82 Street Address (P.O. Box Number is Not Acceptable)
c/o 8211 State Rd. 52
83
84 City Hudson FL 85 Zip Code 34667

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.
SIGNATURE Edward W. Pianka, President 4/2/98
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reissuing)

12. OFFICERS AND DIRECTORS

TITLE	Georgia Chamberlain <input checked="" type="checkbox"/> DELETE
NAME	2110 Tarpon Landings Drive
STREET ADDRESS	Tarpon Springs, FL 34689
CITY-ST-ZIP	
TITLE	Mike Cetin <input checked="" type="checkbox"/> DELETE
NAME	2130 Tarpon Landings Dr.
STREET ADDRESS	Tarpon Springs, FL 34689
CITY-ST-ZIP	
TITLE	C.G. GLINSKI <input checked="" type="checkbox"/> DELETE
NAME	2110 Tarpon Landings Drive
STREET ADDRESS	Tarpon Springs, FL 34689
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P/D Edward W. Pianka <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	2100 Tarpon Landings Dr.
1.3 STREET ADDRESS	Tarpon Springs, FL 34689
1.4 CITY-ST-ZIP	
2.1 TITLE	V/D Raymond E. Moon <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	2160 Tarpon Landings Dr.
2.3 STREET ADDRESS	Tarpon Springs, FL 34689
2.4 CITY-ST-ZIP	
3.1 TITLE	T/D Elisabeth Snyder <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	2144 Tarpon Landings Dr.
3.3 STREET ADDRESS	Tarpon Springs, FL 34689
3.4 CITY-ST-ZIP	
4.1 TITLE	S/D Melanie A. Barry <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	2140 Tarpon Landings Dr.
4.3 STREET ADDRESS	Tarpon Springs, FL 34689
4.4 CITY-ST-ZIP	
5.1 TITLE	D Fred J. Boston <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	2148 Tarpon Landings Dr.
5.3 STREET ADDRESS	Tarpon Springs, FL 34689
5.4 CITY-ST-ZIP	
6.1 TITLE	200002481522 <input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	-04/07/98--01014--031
6.3 STREET ADDRESS	***61.25
6.4 CITY-ST-ZIP	

14. 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 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 if changed, or on an attachment with an address.

SIGNATURE: Edward W. Pianka, President 4/2/98 (813) 942-1404
Signature typed or printed name of signing officer or director Date Daytime Phone #

CR2E037 (10/97)