

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90367 031 ****61.25

DOCUMENT # N31616

1. Entity Name
TARA VERANDAS COMMONS ASSOCIATION, INC.



Principal Place of Business
**HARMONY MGMT
4400 EL CONQUISTADOR PKWY
BRADENTON FL 34210**

Mailing Address
**HARMONY MGMT
4400 EL CONQUISTADOR PKWY
BRADENTON FL 34210**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0125426**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HARMONY MANAGEMENT
4400 EL CONQUISTADOR PKWY
STE 1
BRADENTON FL 34282**

Name
Street Address (P.O. Box Number is Not Acceptable)
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WACHTER, WILBER 6609 STONE RIVER RD BRADENTON FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MUSSER, RANDY 6713 STONE RIVER RD #205 BRADENTON FL 34203 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT STANZ, GEORGE 6707 STONE RIDGE RD #205 BRADENTON FL 34203 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD O'ROURKE, JAMES 6713 STONE RIVER RD BRADENTON FL 34203 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Virginia Melberts <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 6713 Stone River rd Bradenton FL 34203
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D William Ward <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 6713 Stone River rd #106 Bradenton FL 34203
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Malcolm Stafford <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 6609 Stone River rd Bradenton FL 34203
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Pete Bedessem <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 6609 Stone River rd Bradenton FL 34203
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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: *[Handwritten Signature]*

CR2E037 (10/02)