

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 12 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N 40603
1. Corporation Name
Twelve Oaks I of Tara Condominium
Association, Inc.

Principal Place of Business Mailing Address
6300 Stone River Rd.
Bradenton, FL 34203
HARMONY MANAGEMENT
P.O. BOX 10087
BRADENTON, FL 34282

3. Date Incorporated or Qualified

4. FEI Number 65-0226019 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

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Turner, Sally
4400 E1 Conquistador Pkwy
Bradenton, FL 34210

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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 Sally Turner, CAM DATE 2-19-1998
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	Pres. ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	John Bromley	1.2 NAME	
STREET ADDRESS	6337 Stone River Road	1.3 STREET ADDRESS	
CITY-ST-ZIP	Bradenton, FL 34203	1.4 CITY-ST-ZIP	
TITLE	V. Pres. ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	John A. Bianco	2.2 NAME	
STREET ADDRESS	6304 Stone River Road	2.3 STREET ADDRESS	
CITY-ST-ZIP	Bradenton, FL 34203	2.4 CITY-ST-ZIP	
TITLE	V. Pres / Dir ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	George Ross	3.2 NAME	
STREET ADDRESS	6302 Stone River Road	3.3 STREET ADDRESS	
CITY-ST-ZIP	Bradenton, FL 34203	3.4 CITY-ST-ZIP	
TITLE	Tres. ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	JoAnn Chaja	4.2 NAME	
STREET ADDRESS	6324 Stone River Road	4.3 STREET ADDRESS	
CITY-ST-ZIP	Bradenton, FL 34203	4.4 CITY-ST-ZIP	
TITLE	Sect. ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	Tom DeMartini	5.2 NAME	
STREET ADDRESS	6305 Stone River Rd	5.3 STREET ADDRESS	
CITY-ST-ZIP	Bradenton, FL 34203	5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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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: John Bromley 2/25/98 941-758-9624
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/97)