2000 UNIFORM BUSINESS REPORT (UBR)

## **FILED DOCUMENT # N40603** Jan 29, 2000 8:00 am Secretary of State 1. Entity Name TWELVE OAKS I OF TARA ASSOCIATION, INC. 01-29-2000 90010 047 \*\*\*\*61.25 Principal Place of Business Mailing Address 6300 STONE BIVER RD. HARMONY MANAGEMENT BRADENFON FL 34203 P.O.BOX 10067 910004 BRADENTON FL 34282-0067 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. 4400 EIC DO NOT WRITE IN THIS SPACE 1006 City & State 4. FEI Number Applied For 65-0226019 Country Not Applicable Country 5. Certificate of Status Desired \$8.75 Additional 6. Name and Address of Current Registered Agent Fee Required 7. Name and Address of New Registered Agent Name HARMONY MANAGEMENT Street Address (P.O. Box Number is Not Acceptable) 4400 EL CONQUESTADOR PARKWAY **BRADENTON FL 34210** 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. Zíp Code SIGNATURE Signature, typed or printed name of registered agent and title if applicable, (NOTE. Registered Agent signature required when reinstating) DATE FILE NOW: 9. Election Campaign Financing \$5.00 May Be FEE IS \$61.25 Make Check Payable to Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE Delete. TITLE NAME BROMLEY, JOHN Change NAME ☐ Addition STREET ADDRESS 6337 STONE RIVER ROAD, #403 STREET ADDRESS CITY-ST-ZIP BRADENTON FL 34203 CITY-ST-ZIP TITLE ☐ Defete TITLE NAME BIANCO, JOHN A. Change ☐ Addition STREET ADDRESS 6304 STONE RIVER ROAD, UNIT #604 STREET ADDRESS CITY-ST-ZIP BRADENTON FL 34203 CITY-ST-ZIP TITLE SD Delete TITLE NAME ROSS, GEORGE H. ☐ Change ☐ Addition STREET ADDRESS NAME 6302 STONE RIVER ROAD STREET ADDRESS CITY-ST-ZIP BRADENTON FL 34203 CITY-ST-ZIP TITLE Delete TITLE NAME ROSS, GEORGE ☐ Change ☐ Addition NAME STREET ADDRESS 6502 STONE RIVER ROAD STREET ADDRESS CiTY-ST-ZIP BRADENTON FL 34203 CITY-ST-7iP TITLE ☐ Delete TITLE AME ☐ Change ☐ Addition TREET ADDRESS NAME STREET ADDRESS ITY-ST-ZIP CITY-ST-ZIP ITLE Delete TITLE AME ☐ Change ☐ Addition NAME TREET ADDRESS STREET ADDRESS TY-ST-ZIP CITY-ST-ZIP I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. Lituration indicated on this report or supplemental report is true and accurate and that it is a section of the company.