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

## **DOCUMENT # N40603**

1. Entity Name

TWELVE OAKS I OF TARA ASSOCIATION, INC.



## **FILED** Mar 11, 2003 8:00 am § Secretary of State

03-11-2003 90137 044 \*\*\*\*61.25

			SO WE THE						
HARMONY MANAGEMENT HARMO 4400 EL CONQUISTADOR PKWY 4400 EL		Mailing Address HARMONY MANAGEMENT 4400 EL CONQUISTADOR PKWY BRADENTON FL 34210							
		US		THE STATE OF A LAN	. <b>Bana a</b> nn <b>Bana</b> ann aigh				
2. Principal Place of Business 3. N		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
City & State		City & State	City & State		4. FEI Number 65-0226019 Applied For Not Applied				
Zip	Country		ountry	5 Certificate of Stat	us Desired	\$8.75 Additional			
6.	Name and Address of Cur	rent Registered Agent		7. Name and Addre	ss of New Registere	ed Agent			
GRANT, HARR 4400 EL CONO BRADENTON F	DUESTADOR PARKWAY	<b>#15</b>	Street Address	- slutar					
8. The above name the obligations of	d entity submits this stateme registered agent.	nt for the purpose of changing its registe	ered office or registe	red agent, or both, in th	e State of Florida. I a	m familiar with, and accept			
SIGNATURESIgnatur	e, typed or printed name of registered a	igent and title if applicable. (NOTE: Registe	red Agent signature required	d when reinstating)	DATI				
FILE NOW: FEE IS \$61.25  9. Election Ca Trust Fund (				\$5.00 May Be Added to Fees		Make Check Payable to Florida Department of State			
10.	OFFICERS AND			ADDITIONS/CHANGES	TO OFFICERS AND	DIRECTORS IN 10			
TITLE DVP		Delete TIT	LE <b>1</b> 0	P		☐ Change ☐ Addition			

	512	Trust Fund Cor	ntribution.	□ Ad	ded to Fees	Florida Depar	tment of S	State
10.	OFFICERS AND DIRECTORS		11.	ADD	ITIONS/CHANG	ES TO OFFICERS AND D	BECTORS IN	10
TITLE	DVP	Delete	TITLE	DVA	7	LO TO OTTIOLINO AIRD B	☐ Change	
NAME	MARKELLOUS, PETE	7	NAME	12	or Doct	7	☐ Change	☐ Addition
STREET ADDRESS	6307 STONE RIVER ROAD	r	STREET ADDRESS	(2)	5/7772	.verrd		ľ
CITY-ST-ZIP	BRADENTON FL 34203		CITY-ST-ZIP	03/0	Brade	ton F 3423	,	
TITLE	DVP	☐ Delete	TITLE				Change	☐ Addition
NAME	DEMORIA, LOUIS		NAME	Tir Ili	Em JUC	· 00	☐ Ollange	Addition
_STREET ADDRESS	.14 LA GRANGE ROAD		STREET ADDRESS	6312	em Jur. Stoneri	var rd		
CITY-ST-ZIP	DELMAR NY 12054		CITY-ST-ZIP		Brades	ton 34403		{
TITLE	SD	Delete	TITLE				☐ Change	Addition
NAME	ELLINGER, LYNN	/~~~	NAME	Cherli	e Swen	150n /	☐ Change	
STREET ADDRESS	6327 SLOW RIVER DR		STREET ADDRESS	6323	e Swen	vo-rd		
CITY-ST-ZIP	BRADENTON FL 34210		CITY-ST-ZIP	13	radenta	F/31/20	3	
TITLE	DT	Delete	TITLE	1)5			☐ Change	Addition
NAME	ERBORGE, BILL	/	NAME	Deba	ah Co.G	60.11 c	Onlings	Addition
STREET ADDRESS	6325 STONE RIVER ROAF		STREET ADDRESS	6 212	chone c	מים בינו		
CITY-ST-ZIP	BRADENTON FL 34203		CITY-ST-ZIP	J. J.	3300 de	well , ver rd - ten F 34207	7	
TITLE	PD	Delete	TITLE	-	,	-10-1	☐ Change	☐ Addition
	HOLTON, ROBERT		NAME				ondingo	
STREET ADDRESS	6319 STONE RIVER RD.		STREET ADDRESS					}
CITY-ST-ZIP	BRADENTON FL 34203		CITY - ST - ZIP					{
TITLE		☐ Delete	TITLE				☐ Change	Addition
NAME			NAME					
STREET ADDRESS		ł	STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					
								ſ

formation 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 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 acciver or trusted empoying to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if I hereby certify that the int of the corporation changed, or on ar

SIGNATURE: