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NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N93000000232 (9)

THE FRENCH QUARTERS AT TARA HOMEOWNERS ASSOCIATI ON, INC. Principal Place of Business Mailing Address 7019 CHICKASAW BAYOU 7019 CHICKASAW BAYOU 3. Date Incorporated or Qualified **BRADENTON FL 34203 BRADENTON FL 34203** 01/20/1993 Applied For 65-0584238 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 21 26 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be 22 27 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes No 23 28 Zip Country Country Zip This corporation owes or has paid the current year Intangible ☐ Yes 24 25 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CHARLES O'CONNOR 62 Street Address (P.O. Box Number is Not Acceptable) 7019 CHICKASAW BAYOU 83 **BRADENTON FL 34203** 84 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 TITLE NAME ROBERT OVERMYER 1.2 NAME **CR2E037** STREET ADDRESS 6917 CHICKASAW BAYOU 1.3 STREET ADDRESS CITY-ST-ZIP **BRADENTON FL** 1.4 CITY-ST-ZIP DELETE M Addition Change 2.1 TITLE ۷D TITLE HELBER, RAPLH 2.2 NAME NAME 7007 CHICKASAW BAYOU 2.3 STREET ADORESS STREET ADORESS BRADENTON FL CITY-ST-ZIP 2.4 CITY-ST-7IP Change Addition DELETE TITLE 3.1 TITLE PD O'CONNOR, CHARLES 3.2 NAME NAME 7019 CHICKASAW BAYOU 3.3 STREET ADDRESS STREET ADDRESS **BRADENTON FL** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Addition TITLE MCALEAR, ALLAN 4. 2 NAME NAME 7012 CHICKASAW BAYOU STREET ADDRESS 4.3 STREET ADDRESS **BRADENTON FL 34203** CITY-ST-ZIP 4.4 CITY - ST- ZIP DELETE Addition Change TITLE 5.1 TITLE NAME SCHEEL, JANE 5.2 NAME 6921 CHICKASAW BAYOU **5.3 STREET ADDRESS** STREET ADDRESS **BRADENTON FL** CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 61 TITLE Change ☐ Addition NAME 6.2 NAME

14. 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. 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 char ned, or on an attachment with an address. JOWNER -

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

4-4-98

FILED

Apr 17 1998 8:00am

Secretary of State