2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 19, 2006 8:00 am Secretary of State

					Secretary of State				
DOCUMENT # N9900000396 1. Entity Name TATUM RIDGE OWNERS ASSOCIATION, INC.						-19-2006 9	•		
Principal Place of Business 4301 32ND STREET WEST SUITE A-19 BRADENTON, FL 34205		Mailing Address 4301 32ND ST. W. A-20 BRADENTON, FL 34205 US] - 	1 5 111 55 111 56 111 5 1		. 	[
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.				ng-NP	CR2E0	37 (11/05)	<u>-</u>
City & State		City & State			4. FEI Number 59-361904	2		No	plied For Applicable
Zip	Country	Zìp	Country		5. Certificate of St		<u> </u>	\$8.75 Add	
6. Name and Address of Current Registered Agent					7. Name and Add	ress of New I	Registerea	Agent	
C & S CO 4301 32NI	M.H. CHRIS NDO MGT. SERVICES, INC. D ST. WEST, SUITE A-20 ON, FL 34205			et Address (P.O. Box Number is Not Acceptable) 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 Signature, med or printed name of registered agent and tide if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								and accept	
Filing Fee is \$61.25 Due by May 1, 2006 10. OFFICERS AND DIRECTORS 9. Election Campaign Finar Trust Fund Contribution.					\$5.00 May Be Added to Fees Make check payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MASE, JEFFREY 7931 KAVANAGH CT. SARASOTA, FL 34240	Delete	11. TITLE NAME STREET ADDRES CITY-ST-ZIP	S Ka	ren Potte 32 Kavun	coah Ct		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KNIGHT, LORI 7919 KAVANAGH CT. SARASOTA, FL 34240	Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	2 130	d Engard 18 Kavana	t wan Ct.		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MOZZICATO, PAUL 343 LONDONDERRY DR. SARASOTA, FL 34240	☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP					☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	LOCASTRO, TINA 287 LONDONDERRY DR. SARASOTA, FL 34240	☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	2 2 8 2 2 2 8 2 2 2 8 2 2 2 8 2 2 2 2 8 2	re Lucasto 7 Lundun rasotu, s		۵۲. علاه	Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	NASBY, ROBERT 347 LANDONBERRY DR. SARASOTA, FL 34240	☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	5 34-	pert Nowl London	لعته بع (Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP					Change	☐ Addition

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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: \(\sigma\)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR

1/11/06 (44) 7165675