2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002762

FILED Mar 02, 2005 Secretary of State

Entity Name: TANNER ROAD PHASES 1 AND 2 PROPERTY OWNERS ASSOCIATION, INC.

Current Bringing Bloss of Business		New Princ	New Principal Place of Business:			
Current Principal Place of Business:			New Fillic	ipai r lace of Busiliess.		
2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 32779 US						
LONGWOC	D, FL 32119	03				
Current Mailing Address:			New Maili	New Mailing Address:		
2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 32779 US						
FEI Number:	59-3556325	FEI Number Applied For () FEI N	umber Not Appl	icable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
HART, JAMES W JR C/O SENTRY MANAGEMENT INC 2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 32779 US						
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.						
SIGNATURE:						
		Signature of Registered Agent		 Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD (X) D BROWN, HERMAI 14632 KRISTENR ORLANDO, FL 32	N IGHT LANE	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	SD () D RICHENDOLLAR, 4032 SHAWN CIR ORLANDO, FL 32	CAROLEE CCLE	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	VD () D HARRIS, TAMMY 14540 KRISTENR ORLANDO, FL 32	IGHT LANE	Title: Name: Address: City-St-Zip:	VPD (X) Change () Addition HARRIS, TAMMY 14540 KRISTENRIGHT LANE ORLANDO, FL 32826		
Title: Name: Address: City-St-Zip:	TD () D TAGGART, ELWC 4020 SHAWN CIR ORLANDO, FL 32	OOD CCLE	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	D (X) D CULLEN, AARON 4028 SHAWN CIR ORLANDO, FL 32	1	Title: Name: Address: City-St-Zip:	()Change ()Addition		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TAMMY HARRIS VPD 03/02/2005