

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 02, 2007 8:00 am**  
**Secretary of State**

04-02-2007 90101 019 \*\*\*\*61.25

**DOCUMENT # 715711**

1. Entity Name

**TOWN HOUSE ESTATES HOME OWNERS' ASSOCIATION, INC.**



Principal Place of Business

Mailing Address

100 EMERALD PLACE EAST  
INDIAN HARBOUR BCH FL 32937

100 EMERALD PLACE EAST  
INDIAN HARBOUR BCH FL 32937

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

59-1539862

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

CARRIGAN, ERIN M  
307 EMERALD PLACE EAST  
INDIAN HARBOUR BEACH FL 32937

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

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, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

JOHN L. SMITH, PRES. 3/15/07

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete  
NAME SMITH, JOHN  
STREET ADDRESS 302 PALM SPRINGS BLVD  
CITY-ST-ZIP INDIAN HRBR BCH FL 32937

TITLE VD ☒ Delete  
NAME TEGREENE, CLARE  
STREET ADDRESS 1024 CHEYENNE BLVD  
CITY-ST-ZIP INDIAN HARBOUR BEACH FL 32937

TITLE SD ☐ Delete  
NAME DRAEGER, PAT  
STREET ADDRESS 1026 CHEYENNE BLVE  
CITY-ST-ZIP INDIAN HARBOUR BEACH FL 32937

TITLE TD ☒ Delete  
NAME CARRIGAN, ERIN M  
STREET ADDRESS 307 EMERALD PLACE EAST  
CITY-ST-ZIP INDIAN HARBOUR BEACH FL 32937

TITLE D ☒ Delete  
NAME MCHUGH, DEVIN  
STREET ADDRESS 416 EMERALD DRIVE SOUTH  
CITY-ST-ZIP INDIAN HARBOUR BCH FL 32937

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
NAME CORTRIGHT, JAMES  
STREET ADDRESS 201 EMERALD DR. N.  
CITY-ST-ZIP INDIAN HARBOUR BCH. FL 32937

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
NAME CAROL SCOFIELD  
STREET ADDRESS 205 EMERALD DR N  
CITY-ST-ZIP INDIAN HARBOUR BCH. FL 32937

TITLE ☒ Change ☐ Addition  
NAME MARJORIE ROSE  
STREET ADDRESS 303 EMERALD PL. E.  
CITY-ST-ZIP INDIAN HARBOUR BCH. FL 32937

TITLE ☐ Change ☒ Addition  
NAME EUGENE REBHOLZ  
STREET ADDRESS 328 EMERALD PL. W  
CITY-ST-ZIP INDIAN HARBOUR BCH. FL 32937

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOHN LEE SMITH

3/15/07 321 773 2972

DOCUMENT #715711

ATTACHMENT

11, ADDITION

D.

ROBERT BROCK

1022 CHEYENNE BLVD.

INDIAN HARBOUR BCH.

FL. 32937

TOWN HOUSE ESTATES  
HOME OWNERS' ASSN.

100 EMERALD PL. E.  
INDIAN HARBOUR BCH.

FL. 32937