## 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 760145** 

Entity Name: TARPON ISLAND CLUB CONDOMINIUM ASSOCIATION, INC.

FILED
Jun 22, 2020
Secretary of State
1232698574CC

## **Current Principal Place of Business:**

1820 TARPON LANE VERO BEACH, FL 32960

## **Current Mailing Address:**

AR CHOICE MANAGEMENT 100 VISTA ROYALE BLVD VERO BEACH. FL 32962 US

FEI Number: 59-2331516 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

AR CHOICE MANAGEMENT AR CHOICE MANAGEMENT 100 VISTA ROYALE BLVD VERO BEACH, FL 32962 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: PAUL FULLER, PRESIDENT 06/22/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

City-State-Zip:

 Title
 VP
 Title
 PRESIDENT

 Name
 PATTERSON, STEVE
 Name
 FULLER, PAUL

Address AR CHOICE MANAGEMENT Address AR CHOICE MANAGEMENT

100 VISTA ROYALE BLVD 100 VISTA ROYALE BLVD

VERO BEACH FL 32962 City-State-Zip: VERO BEACH FL 32962

Title SECRETARY Title DIRECTOR

Name ANDERSON, JOANNE Name BENTLEY, ALLAN

Address AR CHOICE MANAGEMENT Address AR CHOICE MANAGEMENT

100 VISTA ROYALE BLVD 100 VISTA ROYALE BLVD

City-State-Zip: VERO BEACH FL 32962 City-State-Zip: VERO BEACH FL 32962

Title TREASURER
Name POWERS, TRACEY

Address AR CHOICE MANAGEMENT

100 VISTA ROYALE BLVD

City-State-Zip: VERO BEACH FL 32962

I hereby 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 all other like empowered.

SIGNATURE: PAUL FULLER PRESIDENT 06/22/2020