

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000007703

**Entity Name:** TIDE CREEK LANDING HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

2121 KILLARNEY WAY  
TALLAHASSEE, FL 32309

**Current Mailing Address:**

POST OFFICE BOX 11143  
TALLAHASSEE, FL 32302 US

**FEI Number:** 59-3755303

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FLORIDA ASSOCIATION & PROPERTY MANAGEMENT, INC.  
2121 KILLARNEY WAY  
TALLAHASSEE, FL 32309 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:** JOANIE TROTMAN

04/16/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name LAWSON, ROBERT E  
Address POST OFFICE BOX 11143  
City-State-Zip: TALLAHASSEE FL 32302

Title D  
Name BROWER, RON  
Address POST OFFICE BOX 11143  
City-State-Zip: TALLAHASSEE FL 32302

Title T  
Name PYBUS, WIMPY L  
Address POST OFFICE BOX 11143  
City-State-Zip: TALLAHASSEE FL 32302

Title VPD  
Name BUKER, DANIEL J  
Address 2119 GLENRIDGE DR.  
City-State-Zip: TALLAHASSEE FL 32308

Title D  
Name GONZALEZ, MARIO  
Address POST OFFICE BOX 11143  
City-State-Zip: TALLAHASSEE FL 32302

*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:** ROBERT E LAWSON

CAM

04/16/2015

Electronic Signature of Signing Officer/Director Detail

Date