

2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N04338

Entity Name: TARA LAKES HOMEOWNERS ASSOCIATION, INC.

FILED
Oct 15, 2019
Secretary of State
8278834482CC

Current Principal Place of Business:

C/O DAVENPORT PROPERTY MGMT.
6620 LAKE WORTH RD. SUITE F
LAKE WORTH, FL 33467

Current Mailing Address:

C/O DAVENPORT PROPERTY MGMT.
6620 LAKE WORTH RD. SUITE F
LAKE WORTH, FL 33467 US

FEI Number: 59-2521124

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STOLOFF & MANOFF, PA
1818 AUSTRALIAN AVE., S.
SUITE 400
WEST PALM BEACH, FL 33409 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: SCOTT STOLOFF

10/15/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name FERGUSON, ERIC
Address C/O DAVENPORT PROPERTY MGMT.
6620 LAKE WORTH RD. SUITE F
City-State-Zip: LAKE WORTH FL 33467

Title TREASURER
Name MONTERO, DANNY
Address C/O DAVENPORT PROPERTY MGMT.
6620 LAKE WORTH RD. SUITE F
City-State-Zip: LAKE WORTH FL 33467

Title PRESIDENT
Name CHIERA, LOUIS
Address C/O DAVENPORT PROPERTY MGMT.
6620 LAKE WORTH RD. SUITE F
City-State-Zip: LAKE WORTH FL 33467

Title SECRETARY
Name BURNS, CECILY
Address C/O DAVENPORT PROPERTY MGMT.
6620 LAKE WORTH RD. SUITE F
City-State-Zip: LAKE WORTH FL 33467

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: LOUIS CHIERA

PRESIDENT

10/15/2019

Electronic Signature of Signing Officer/Director Detail

Date