

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04338

**Entity Name:** TARA LAKES HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Apr 22, 2014**  
**Secretary of State**  
**CC5991445952**

**Current Principal Place of Business:**

43 TARA LAKES DRIVE EAST  
BOYNTON BCH., FL 33436

**Current Mailing Address:**

43 TARA LAKES DRIVE EAST  
BOYNTON BCH., FL 33436

**FEI Number: 59-2521124**

**Certificate of Status Desired: No**

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

DICKER, KRIVOK & STOLOFF, PA  
1818 AUSTRALIAN AVENUE SOUTH  
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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRES  
Name            BIGECK, DIANE  
Address        119 TARA LAKES DR. WEST.  
City-State-Zip: BOYNTON BCH. FL 33436

Title            VP  
Name            FERGUSON, ERIC  
Address        133 TARA LAKES DR W  
City-State-Zip: BOYNTON BEACH FL 33436

Title            BM  
Name            FERGUSON, NEEDRA  
Address        133 TARA LAKES DR W  
City-State-Zip: BOYNTON BEACH FL 33436

Title            BM  
Name            KIRKLAND, SARAH  
Address        1 WHITEHALL WAY  
City-State-Zip: BOYNTON BEACH FL 33436

Title            BM  
Name            TORRES, CARLOS  
Address        142 TARA LAKES DRIVE WEST  
City-State-Zip: BOYNTON BEACH FL 33436

*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: DIANE BIGECK**

**PRESIDENT**

**04/22/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date