

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000000500

**Entity Name:** TARPON KEY CONDOMINIUMS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O OSMS  
419 NEWTON PL  
LONGWOOD, FL 32779

**Current Mailing Address:**

C/O OSMS  
PO BOX 915103  
LONGWOOD, FL 32791 US

**FEI Number:** 20-4486984

**Certificate of Status Desired:** No

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

ONE SOURCE MANAGEMENT SOLUTIONS, INC  
C/O OSMS  
PO BOX 915103  
LONGWOOD, FL 32791 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:** BRENDA ROZANC

01/18/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            WARD, TIFFANY  
Address        C/O OSMS  
                  PO BOX 915103  
City-State-Zip: LONGWOOD FL 32791

Title            MANAGER  
Name            ONE SOURCE MANAGEMENT  
                  SOLUTIONS, INC  
Address        C/O OSMS  
                  PO BOX 915103  
City-State-Zip: LONGWOOD FL 32791

*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:** BRENDA ROZANC

RA

01/18/2019

Electronic Signature of Signing Officer/Director Detail

Date