

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08292

Entity Name: TALL PINES COMMUNITY ASSOCIATION, INC.**Current Principal Place of Business:**5430 SPRING HILL DR
SPRING HILL, FL 34606**Current Mailing Address:**5430 SPRING HILL DR
SPRING HILL, FL 34606 US**FEI Number:** 59-2722574**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PARKLANE REAL ESTATE SERVICES, LLC
5430 SPRING HILL DR
SPRING HILL, FL 34606 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:** DORA STEED

04/01/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name ANTKOWIAK, DAVE
Address 5430 SPRING HILL DR
City-State-Zip: SPRING HILL FL 34606

Title DIRECTOR
Name CASSELLA, CARL
Address 5430 SPRING HILL DR
City-State-Zip: SPRING HILL FL 34606

Title DIRECTOR
Name BRANDT, JACK
Address 5430 SPRING HILL DR
City-State-Zip: SPRING HILL FL 34606

Title DIRECTOR
Name KROBATSCH, BOB
Address 5430 SPRING HILL DR
City-State-Zip: SPRING HILL FL 34606

Title VP
Name JOHNSON, BUD
Address 5430 SPRING HILL DR
City-State-Zip: SPRING HILL FL 34606

Title PRESIDENT
Name HORVATH, DAWN
Address 5430 SPRING HILL DR
City-State-Zip: SPRING HILL FL 34606

Title TREASURER
Name DOUGLAS, A.J.
Address 5430 SPRING HILL DR
City-State-Zip: SPRING HILL FL 34606

Title DIRECTOR
Name MORAN, PAULA
Address 5430 SPRING HILL DR
City-State-Zip: SPRING HILL FL 34606

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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: DAVE ANTKOWIAK

SECRETARY

04/01/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	VAN NORT, KEVIN
Address	5430 SPRING HILL DR
City-State-Zip:	SPRING HILL FL 34606