

**2013 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N30514

**Entity Name:** TALL PINES ESTATES PHASE VI TRACT II HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

AMERI-TECH REALTY, INC  
24701 US HIGHWAY 19 N SUITE 102  
CLEARWATER, FL 33763

**Current Mailing Address:**

AMERI-TECH REALTY, INC  
24701 US HIGHWAY 19 N SUITE 102  
CLEARWATER, FL 33763 US

**FEI Number: 59-3096045**

**Certificate of Status Desired: No**

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

BROWDER, KAREN  
AMERI-TECH REALTY, INC  
24701 US HIGHWAY 19 N SUITE 102  
CLEARWATER, FL 33763 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: KAREN BROWDER**

**07/09/2013**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           PTD  
Name           BRYANT, WILLIAMS  
Address        AMERI-TECH REALTY, INC  
                  24701 US HIGHWAY 19 N SUITE 102  
City-State-Zip: CLEARWATER FL 33763

Title           VPD  
Name           LESPERANCE, PATRICIA  
Address        AMERI-TECH REALTY, INC  
                  24701 US HIGHWAY 19 N SUITE 102  
City-State-Zip: CLEARWATER FL 33763

Title           TD  
Name           AKINS, DIANA  
Address        AMERI-TECH REALTY, INC  
                  24701 US HIGHWAY 19 N SUITE 102  
City-State-Zip: CLEARWATER FL 33763

Title           SD  
Name           CORREA, RHONDA  
Address        AMERI-TECH REALTY, INC  
                  24701 US HIGHWAY 19 N SUITE 102  
City-State-Zip: CLEARWATER FL 33763

Title           DIR  
Name           WILLIS, ROSE  
Address        AMERI-TECH REALTY, INC  
                  24701 US HIGHWAY 19 N SUITE 102  
City-State-Zip: CLEARWATER FL 33763

*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: WILLIAMS BRYANT**

**PTD**

**07/09/2013**

