

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N36352

**Entity Name:** TIGER ISLAND OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**6209 IMPERIAL KEY  
TAMPA, FL 33615**Current Mailing Address:**P.O.BOX 546  
CEDAR KEY, FL 32625**FEI Number:** 59-2978921**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RUBIO, JOSE  
27427 RADLOFF LANE  
DADE CITY, FL 33525 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	VP
Name	REICHERT, JOSEPH
Address	12141 62ND STREET NORTH SUITE 11
City-State-Zip:	LARGO FL 33773

Title	M
Name	CHARLES SCHOMMER
Address	1643 NE ARCH AVE
City-State-Zip:	JENSEN BEACH FL

Title	S
Name	ZAKREWSKI, RICHARD
Address	P.O. BOX 546
City-State-Zip:	CEDAR KEY FL 32625

Title	T
Name	FREYRE, LISA
Address	6209 IMPERIAL KEY
City-State-Zip:	TAMPA FL 33615
Title	P
Name	RUBIO, JOSE
Address	27424 RADOLOFF LN
City-State-Zip:	DADE CITY FL 33525

*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:** LISA FREYRE**TREASURER****03/04/2021**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date