

2023 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N49083

Entity Name: TERRACES 4 OF TARA CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**C/O REALMANAGE
2477 STICKNEY POINT RD SUITE 118A
SARASOTA, FL 34231**Current Mailing Address:**C/O REALMANAGE
PO BOX 803555
DALLAS, TX 75380 US**FEI Number:** 65-0337352**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:** LAURA JONES

03/06/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name DORGAN, KATHEEN
Address C/O REALMANAGE
 2477 STICKNEY POINT RD SUITE
 118A
City-State-Zip: SARASOTA FL 34231

Title VP
Name JOSEPH, DENISE
Address C/O REALMANAGE
 2477 STICKNEY POINT RD SUITE
 118A
City-State-Zip: SARASOTA FL 34231

Title SECRETARY
Name CADDELL, JAMES
Address C/O REALMANAGE
 2477 STICKNEY POINT RD SUITE
 118A
City-State-Zip: SARASOTA FL 34231

Title TREASURER
Name CARTWRIGHT, DAVID
Address C/O REALMANAGE
 2477 STICKNEY POINT RD SUITE
 118A
City-State-Zip: SARASOTA FL 34231

Title DIRECTOR
Name RUGGIERO, ELLEN
Address C/O REALMANAGE
 2477 STICKNEY POINT RD SUITE
 118A
City-State-Zip: SARASOTA FL 34231

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: KATHEEN DORGAN

PRESIDENT

03/06/2023

Electronic Signature of Signing Officer/Director Detail

Date