

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 702634 (7)

1. Corporation Name

TIERRA VERDE COMMUNITY ASSOCIATION, INC.

FILED
1995 FEB -6 PM 12:14
STATE
DIVISION OF CORPORATIONS

Principal Place of Business

Mailing Address

1120 PINELLAS BAYWAY
SUITE 200
TIERRA VERDE FL 33715

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SUITE 200
TIERRA VERDE FL 33715

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/30/1961	3a. Date of Last Report 02/21/1994
4. FBI Number 59-6152369	Applied For Not Applicable
5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21	25
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip	Country
24	29
	30

9. Name and Address of Current Registered Agent

DUPRE, STEVEN C.
100 SECOND AVENUE, SOUTH, SUITE #1202
ST. PETERSBURG FL 33701

10. Name and Address of New Registered Agent

81 Name	Dupre, Steven C.
82 Street Address (P.O. Box Number is Not Acceptable)	200 Central Avenue, Suite 2300
83	Barnett Tower - Carlton, Fields, et al
84 City	St. Petersburg
85 Zip Code	FL 33701

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent, and date.

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD V	1.1 TITLE	VD
NAME	MORGAN, GEORGE R	1.2 NAME	
STREET ADDRESS	124 7TH ST E	1.3 STREET ADDRESS	
CITY-ST-ZIP	TIERRA VERDE FL	1.4 CITY-ST-ZIP	
TITLE	SD	2.1 TITLE	
NAME	DUPRE, STEVEN C	2.2 NAME	
STREET ADDRESS	365 2ND ST W	2.3 STREET ADDRESS	
CITY-ST-ZIP	TIERRA VERDE FL	2.4 CITY-ST-ZIP	
TITLE	TD	3.1 TITLE	TD
NAME	RALPH, JOHN F JR	3.2 NAME	HAZEL MIKE
STREET ADDRESS	294 MONTE CRISTO BLVD	3.3 STREET ADDRESS	126 12th STREET E, #104
CITY-ST-ZIP	TIERRA VERDE FL	3.4 CITY-ST-ZIP	Tierra Verde, FL
TITLE	VD	4.1 TITLE	
NAME	CLEMENT, JOHN C	4.2 NAME	
STREET ADDRESS	138 1ST ST E #303	4.3 STREET ADDRESS	
CITY-ST-ZIP	TIERRA VERDE FL	4.4 CITY-ST-ZIP	
TITLE	VD	5.1 TITLE	VD
NAME	KLING, JUDY F	5.2 NAME	Ierna Randall K
STREET ADDRESS	113 1 ST EAST #203	5.3 STREET ADDRESS	181 BRD Street West
CITY-ST-ZIP	TIERRA VERDE FL	5.4 CITY-ST-ZIP	Tierra Verde, FL
TITLE	VD	6.1 TITLE	PD
NAME	COHEN, STEVEN B	6.2 NAME	
STREET ADDRESS	729 PONCE DE LEON DR	6.3 STREET ADDRESS	
CITY-ST-ZIP	TIERRA VERDE FL	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or no attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #