

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731162

FILED  
Apr 10, 2009  
Secretary of State

Entity Name: THE TAMARIND, INC.

**Current Principal Place of Business:**

6665 N. OCEAN BLVD  
OCEAN RIDGE, FL 33435

**New Principal Place of Business:**

**Current Mailing Address:**

6665 N. OCEAN BLVD  
OCEAN RIDGE, FL 33435

**New Mailing Address:**

FEI Number: 59-1558803      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BECKER & POLIAKOFF, P.A.  
625 NORTH FLAGLER DRIVE - 7TH FLOOR  
WEST PALM BEACH, FL 33401      US

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

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

**OFFICERS AND DIRECTORS:**

Title: T      ( ) Delete  
Name: WHEELER, GRANT  
Address: 6665 N OCEAN BLVD  
City-St-Zip: OCEAN RIDGE, FL 33435

Title: VP      ( ) Delete  
Name: SMITH, LOU  
Address: 6665 N OCEAN BLVD  
City-St-Zip: OCEAN RIDGE, FL 33435

Title: P      ( ) Delete  
Name: BENISCH, JOHN  
Address: 6665 N OCEAN BLVD  
City-St-Zip: OCEAN RIDGE, FL 33435

Title: V      ( ) Delete  
Name: GUSTAFSON, ERIK  
Address: 6665 N OCEAN BLVD  
City-St-Zip: OCEAN RIDGE, FL 33435

Title: S      ( ) Delete  
Name: DOVOVAN, LARRY  
Address: 6665 N. OCEAN BLVD.  
City-St-Zip: OCEAN RIDGE, FL 33435

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: T      (X) Change ( ) Addition  
Name: BARTHOLOMEW, ARTHUR  
Address: 6665 N OCEAN BLVD  
City-St-Zip: OCEAN RIDGE, FL 33435

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN H BENISCH

P

04/10/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date