

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731611

FILED
Feb 27, 2012
Secretary of State

Entity Name: TALLAVANA HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

LAKE TALLAVANA
TALLAVANA TRAIL
HAVANA, FL 32333

New Principal Place of Business:

Current Mailing Address:

TALLAVANA HOMEOWNERS' ASSOCIATION
P O BOX 1075
HAVANA, FL 32333

New Mailing Address:

FEI Number: 59-1902141

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, DEBRA K
145 HONEYSUCKLE DR
HAVANA, FL 32333 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: P
Name: ROBERTS, CHERYL
Address: 3565 TALLAVANA TRAIL
City-St-Zip: HAVANA, FL 32333

Title: VP
Name: CARTER, MIKE
Address: 170 HICKORY LANE
City-St-Zip: HAVANA, FL 32333

Title: S
Name: COMBS, ROBERT
Address: 1260 TALLAVANA TRAIL
City-St-Zip: HAVANA, FL 32333

Title: T
Name: STANSBERRY, JOHN
Address: 1423 TALLAVANA TR
City-St-Zip: HAVANA, FL 32333

Title: D
Name: BOATRIGHT, BOBBY
Address: 2472 TALLAVANA TR
City-St-Zip: HAVANA, FL 32333

Title: D
Name: SHEFFIELD, SKIP
Address: 1291 TALLAVANA
City-St-Zip: HAVANA, FL 32333

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: CHERYL ROBERTS

PRES

02/27/2012

Electronic Signature of Signing Officer or Director

Date