## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#746882** 

FILED Jan 05, 2009 Secretary of State

Entity Name: TANNAHILL HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1824 N.W. 102ND WAY GAINESVILLE, FL 32606

Current Mailing Address: New Mailing Address:

1824 N.W. 102ND WAY GAINESVILLE, FL 32606

FEI Number: 59-3005311 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

JOHNS, EDWIN JOHNS, EDWIN C TREAS.

1824 N.W. 102ND WAY
GAINESVILLE, FL 32606 US
GAINESVILLE, FL 32606 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: EDWIN C. JOHNS 01/05/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete JOHNS, EDWIN JOHNS, EDWIN C TREAS. Name: Name: 1824 N.W. 102ND WAY Address: 1824 N.W. 102ND WAY Address: City-St-Zip: GAINESVILLE, FL 32606 City-St-Zip: GAINESVILLE, FL 32606 Title: () Delete Title: () Change () Addition VYVERBERG, FRED Name: Name: Address: 2277 N.W. 16TH AVE. Address: City-St-Zip: GAINESVILLE, FL 32606 City-St-Zip: Title: DP () Delete Title: () Change () Addition

Name: GORDON, WILMA Name: ( ) Change ( ) Addition Name:

Address: 2123 NW 102ND WAY Address: City-St-Zip: GAINESVILLE, FL 32606 City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 ZUKAS, MIKE
 Name:

 Address:
 2023 NW 102 WAY
 Address:

 City-St-Zip:
 GAINESVILLE, FL 32606
 City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 PRINDLE, BRIAN
 Name:

 Address:
 1923 NW 102 WAY
 Address:

 City-St-Zip:
 GAINESVILLE, FL 32606
 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: EDWIN C. JOHNS TREA 01/05/2009