

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750580

FILED  
Mar 17, 2009  
Secretary of State

Entity Name: THE PONDS OF TARPON WOODS, INC.

**Current Principal Place of Business:**

251 WIND WARD PASSAGE  
SUITE F  
CLEARWATER, FL 33767 US

**Current Mailing Address:**

251 WIND WARD PASSAGE  
SUITE F  
CLEARWATER, FL 33767 US

FEI Number: 59-1962396

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**New Principal Place of Business:**

251 WINDWARD PASSAGE  
SUITE F  
CLEARWATER, FL 33767 US

**New Mailing Address:**

251 WINDWARD PASSAGE  
SUITE F  
CLEARWATER, FL 33767 US

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

JIM NOBLES MANAGEMENT, INC.  
251 WIND WARD PASSAGE  
SUITE F  
CLEARWATER, FL 33767 US

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

JIM NOBLES MANAGEMENT, INC.  
251 WINDWARD PASSAGE  
SUITE F  
CLEARWATER, FL 33767 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: SHERON O. NICHOLS, LCAM

03/17/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: HICE, JERRY  
Address: 1400 TARPON WOODS BLVD F-4  
City-St-Zip: PALM HARBOR, FL 34685

Title: DVP ( ) Delete  
Name: HICE, JERRY  
Address: 1400 TARPON WOODS BLVD., F-4  
City-St-Zip: PALM HARBOR, FL 34685

Title: VPD ( ) Delete  
Name: HUMPHRIES, GARY  
Address: 1400 TARPON WOODS BLVD E-1  
City-St-Zip: PALM HARBOR, FL 34685

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

Title: VPD (X) Change ( ) Addition  
Name: HUMPHREY, GARY  
Address: 1400 TARPON WOODS BLVD E-1  
City-St-Zip: PALM HARBOR, FL 34685

Title: TD (X) Change ( ) Addition  
Name: MUCCILOLO, RICHARD  
Address: 1400 TARPON WOODS BLVD., I-2  
City-St-Zip: PALM HARBOR, FL 34685

Title: SD (X) Change ( ) Addition  
Name: HATFIELD, RON  
Address: 1400 TARPON WOODS BLVD A-3  
City-St-Zip: PALM HARBOR, FL 34685

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: RICHARD MUCCILOLO

TD

03/17/2009

Electronic Signature of Signing Officer or Director

Date