

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR).

FILED
May 07, 2007 8:00 am
Secretary of State

05-07-2007 90075 021 ****61.25

DOCUMENT # 752097	
1. Entity Name	
TAVARES HOMEOWNERS, INC.	

Principal Place of Business	Mailing Address
756 MARINA LANE TAVARES FL 32778-0827	756 MARINA LANE TAVARES FL 32778-0827

2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



1st MOORE CR2E037 (10/06)

4. FEI Number		Applied For
59-1980287		Not Applicable
5. Certificate of Status Desired		☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
DUGGAN, ROBERT J 1029 WEST MAGNOLIA STREET LEESBURG FL 34748		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL	Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when registering) DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY ST ZIP	D BRODERICK, PATRICIA A 476 MARINA LANE TAVARES FL 32778 ☒ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	Treasurer Judy Eaton A. 440 Marina Lane Tavares, FL 32778 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	C EATON, JACK M 440 MARINA LANE TAVARES FL 32778 ☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	Director not Chairman Eaton, Jack M 440 Marina Lane Tavares, FL 32778 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	D GROGAN, ED 664 MARINA LANE TAVARES FL 32778 ☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	Chairman J. nsky, Robert 556 Marina Lane Tavares, FL 32778 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	D HESS, BERTIE 572 MARINA LANE TAVARES FL 32778 ☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	Director Fafard, Joe 510 Sinclair Circle Tavares, FL 32778 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	D BAILEY, JESS F 723 MARINA LANE TAVARES FL 32778 ☒ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	Director Slayden, Joe 464 Marina Lane Tavares, FL 32778 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	D TAPP, RICHARD 525 MARINA LANE TAVARES FL 32778 ☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Judy R. Eaton Treasurer 4/25/07 352
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 343-6262