

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 755686

**FILED**  
**Mar 15, 2012**  
**Secretary of State**

**Entity Name:** TOURNAMENT VILLAS CONDOMINIUM OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

140 SOUTH COMMERCE AVENUE  
SEBRING, FL 33870

**New Principal Place of Business:**

MATANZAS DR.  
SEBRING, FL 33872

**Current Mailing Address:**

140 SOUTH COMMERCE AVENUE  
SEBRING, FL 33870

**New Mailing Address:**

C/O 3839 EDGEWATER DR.  
SEBRING, FL 33872

**FEI Number:** 59-2212879

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HOLMES, JOHN P  
5756 MATANZAS DRIVE  
SEBRING, FL 33872 US

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

LYONS, CLARENCE  
3839 EDGEWATER DR.  
SEBRING, FL 33872 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: CLARENCE LYONS

03/15/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MCNAMARA, FRANK  
Address: 951 EASTSIDE RD  
City-St-Zip: CAMPTON, NH 03223

Title: SD  
Name: CAMPBELL, NOLA  
Address: 5738 MATANZAS DRIVE  
City-St-Zip: SEBRING, FL 33872

Title: TD  
Name: PAGE, JACK  
Address: 7653 S INDIAN LAKE DRIVE  
City-St-Zip: VICKSBURG, MI 49097

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: CLARENCE LYONS

RA

03/15/2012

Electronic Signature of Signing Officer or Director

Date