

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758202

FILED
Apr 08, 2008
Secretary of State

Entity Name: THE VILLAGE AT TIERRA VERDE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

136 1ST ST EAST
TIERRA VERDE, FL 33715 US

New Principal Place of Business:

5901 SUN BLVD
SUITE 200
ST. PETE, FL 33715 US

Current Mailing Address:

C/O RESOURCE PROPERTY MGMT
5901 SUN BLVD, #200
ST PETERSBURG, FL 33715 US

New Mailing Address:

FEI Number: 59-2152764 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

RESOURCE PROPERTY MGMT
5901 SUN BLVD
SUITE 200
ST PETERSBURG, FL 33715 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 () Delete
Name: KEARLEY, RICHARD
Address: 128 1ST STREET EAST #105
City-St-Zip: TIERRA VERDE, FL 33715

Title: VP () Delete
Name: FRULIO, GENNARO
Address: 103 1ST STREET EAST, #312
City-St-Zip: TIERRA VERDE, FL 33715

Title: T () Delete
Name: SWARTS, NANCY
Address: 138 1ST STREET EAST #306
City-St-Zip: TIERRA VERDE, FL 33715

Title: S () Delete
Name: STERLING, GLORIA
Address: 115 1ST STREET E, #102
City-St-Zip: TIERRA VERDE, FL 33715

Title: D () Delete
Name: SANDERSON, JOHN
Address: 135 1ST STREET E, #204
City-St-Zip: TIERRA VERDE, FL 33715

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: CAROL SHIER

MGR

04/08/2008

Electronic Signature of Signing Officer or Director

Date