

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 758475 (8)

1. Corporation Name

TAMARIND CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

5199 VINELAND RD.
ORLANDO FL 32811

Mailing Address

5199 VINELAND RD.
ORLANDO FL 32811



3. Date Incorporated or Qualified
05/22/1981

3a. Date of Last Report
04/19/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GOVIND, SUNIL
5193 VINELAND RD
ORLANDO FL 32811

81 Name

Mike Myers

82

Street Address (P.O. Box Number is Not Acceptable)

5155 Vineland Dr

83

Orlando, FL 32811

84

City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

[Signature]

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

3/1/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME GOVIND, SUNIL
STREET ADDRESS 5193 VINELAND RD
CITY-ST-ZIP ORLANDO FL

☐ DELETE

1.1 TITLE PD
1.2 NAME Mike Myers
1.3 STREET ADDRESS 5155 Vineland Rd
1.4 CITY-ST-ZIP Orlando, FL 32811

☒ Change ☐ Addition

TITLE DT
NAME FERNANDEZ, ANTONIO
STREET ADDRESS 5151 VINELAND RD
CITY-ST-ZIP ORLANDO FL

☐ DELETE

2.1 TITLE DT
2.2 NAME Marilyn K. Turner
2.3 STREET ADDRESS 5269 Vineland Rd
2.4 CITY-ST-ZIP Orlando, FL 32811

☒ Change ☐ Addition

TITLE SVD
NAME MYERS, MIKE
STREET ADDRESS 5155 VINELAND RD
CITY-ST-ZIP ORLANDO FL

☐ DELETE

3.1 TITLE SVD
3.2 NAME Henrietta Rudd
3.3 STREET ADDRESS 5157 Vineland Rd
3.4 CITY-ST-ZIP Orlando, FL 32811

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Henrietta Rudd

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Henrietta Rudd, up/ass

Feb. 26, 1996

Date

Daytime Phone #

CR2E037 (12/95)