

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 26, 2008 8:00 am**  
**Secretary of State**

03-26-2008 90026 024 \*\*\*\*61.25

DOCUMENT # 760145				50001777	
1. Entity Name TARPON ISLAND CLUB CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business ELLIOTT MERRILL MGMT. 835 20TH PLACE VERO BEACH, FL 32960		Mailing Address RMPULNFSSMNHNJ 946131U IONBF VERO BEACH, FL 32960			
2. Principal Place of Business - No P.O. Box # Elliott Merrill Mgmt. Suite, Apt. #, etc. 835 20th Place City & State Vero Beach, FL		3. Mailing Address Elliott Merrill Mgmt. Suite, Apt. #, etc. 835 20th Place City & State Vero Beach, FL			
Zip 32960		Country US		4. FEI Number 59-2366219	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required		Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent MERRILL, KAREN L ELLIOTT MERRILL COMMUNITY MGMT 835 20TH PLACE VERO BEACH, FL 32960			7. Name and Address of New Registered Agent Name JAY LEVINE, ESQ. Street Address (P.O. Box Number is Not Applicable) 3300 PGA BLVD, SUITE 530 PALM BEACH, GA City PALM BEACH, GARNEL Zip Code 33410		
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 <i>Jay Levine esq.</i>			DATE 3-19-08		
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State.					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WONDERLY, BETTINA 1825 TARPON LANE #H206 VERO BEACH, FL 32960	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD RAMER, JOYCE 1845 TARPON LANE G-201 VERO BEACH, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ANDERSON, DONALD 1840 TARPON LANE #D104 VERO BEACH, FL 32960	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LECLAIR, WALTER 1825 TARPON LANE #304 VERO BEACH, FL 32960	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROACH, JUSTINE 1825 TARPON LANE, # H 105 VERO BEACH, FL 32960	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>Justine M. G. Roach President</i>			DATE: 3-4-08		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			DATE Daytime Phone #		