

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 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 ELLIOTT MERRILL MGMT. 835 20TH PLACE 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 Zip 32960		3. Mailing Address Elliott Merrill Mgmt. Suite, Apt. #, etc. 835 20th Place City & State Vero Beach, FL Zip 32960	
4. FEI Number 59-2366219		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		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, GA 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 <u>Jay Levine esq.</u> DATE <u>3-16-08</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>	
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	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE D NAME WONDERLY, BETTINA STREET ADDRESS 1825 TARPON LANE #H206 CITY-ST-ZIP VERO BEACH, FL 32960	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE SD NAME RAMER, JOYCE STREET ADDRESS 1845 TARPON LANE G-201 CITY-ST-ZIP VERO BEACH, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE TD NAME ANDERSON, DONALD STREET ADDRESS 1840 TARPON LANE #D104 CITY-ST-ZIP VERO BEACH, FL 32960	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D NAME LECLAIR, WALTER STREET ADDRESS 1825 TARPON LANE #304 CITY-ST-ZIP VERO BEACH, FL 32960	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE P NAME ROACH, JUSTINE STREET ADDRESS 1825 TARPON LANE, # H 105 CITY-ST-ZIP 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: <u>Justine M. Roach President</u> DATE <u>3-4-08</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			

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