

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 22, 2003 8:00 am
Secretary of State

04-22-2003 90073 040 ****61.25

DOCUMENT # 760145

1. Entity Name
TARPON ISLAND CLUB CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**ELLIOTT MERRILL MGMT.
1105 12TH STREET
VERO BEACH FL 32960
US**

Mailing Address
**C/O ELLIOTT MANAGEMENT SYSTEMS
1105 12 ST
VERO BEACH FL 32960**



2. Principal Place of Business
**Elliott Merrill Comm. Mgt.
Suite, Apt. #, etc.
835 20th Place**

3. Mailing Address
**Elliott Merrill Comm. Mgt.
Suite, Apt. #, etc.
835 20th Place**

CHECK HERE IF MAKING CHANGES

City & State
Vero Bch FL

City & State
Vero Beach FL

4. FEI Number **59-2366219**

Applied For
 Not Applicable

Zip
32960

Country
Ind. River

Zip
32960

Country
Ind. River

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MERRILL, KAREN L
ELLIOTT MERRILL COMMUNITY MGMT
1105 12TH STREET
VERO BEACH FL 32960**

Name
Karen Merrill
Street Address (P.O. Box Number is Not Acceptable)
**Elliott Merrill Comm. Mgt.
835 20th Pl
Vero Beach FL Zip Code
32960**

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 **Karen L Merrill**

DATE **3/31/03**

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$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	PD	<input type="checkbox"/> Delete
NAME	WINCHESTER, WARREN	
STREET ADDRESS	1845 TARPON LANE #304	
CITY-ST-ZIP	VERO BEACH FL 32960	
TITLE	SD	<input type="checkbox"/> Delete
NAME	RAMER, JOYCE	
STREET ADDRESS	1845 TARPON LANE G-201	
CITY-ST-ZIP	VERO BEACH FL	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	SANCHEZ, ANGELO	
STREET ADDRESS	1845 TARPON LANE #206	
CITY-ST-ZIP	VERO BEACH FL 32960	
TITLE	VD	<input type="checkbox"/> Delete
NAME	LECLAIR, WALTER	
STREET ADDRESS	1825 TARPON LANE #304	
CITY-ST-ZIP	VERO BEACH FL 32960	
TITLE	D	<input type="checkbox"/> Delete
NAME	MCEVOY, DOUGLAS	
STREET ADDRESS	1840 TARPON LANE #186	
CITY-ST-ZIP	VERO BEACH FL 32960	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	LEVI, WINFIELD	
STREET ADDRESS	1845 TARPON LANE, G-106	
CITY-ST-ZIP	VERO BEACH FL	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Donald Anderson	
STREET ADDRESS	1840 Tarpon Lane # D104	
CITY-ST-ZIP	Vero Beach, FL 32960	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: **[Signature]**

04-15-03 772-770-4205

CR2E037 (10/02)