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CORPORATION ANNUAL REPORT
1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 24 PM 2:26

DOCUMENT # 765735 (6)

1. Corporation Name
TAMARON UTILITY AUTHORITY, INC.

Principal Place of Business	Mailing Address
3766 GATEWOOD DRIVE P.O.BOX 7028 SARASOTA FL 34278	3766 GATEWOOD DRIVE P.O.BOX 7028 SARASOTA FL 34278

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/15/1982
3a. Date of Last Report: 04/26/1994
4. FEI Number: 59-2841652 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☑ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business (21): Suite, Apt. #, etc. (22): City & State (23): Zip (24) Country (25)
2a. Mailing Address (26): Suite, Apt. #, etc. (27): City & State (28): Zip (29) Country (30)

9. Name and Address of Current Registered Agent

HARNEY, ROBERT D.
1880 ORANGEWOOD LN
SARASOTA FL 34232

10. Name and Address of New Registered Agent

81 Name: ROBERT HARNEY
82 Street Address (P.O. Box Number is Not Acceptable): 1880 ORANGEWOOD LN
83
84 City: SARASOTA FL 85 Zip Code: 34232

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Robert Harney ROBERT HARNEY — 3-20-95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE	☐ Change ☑ Addition	
NAME	SNELL, LIVINGSTON P.	1.2 NAME		
STREET ADDRESS	1833 SPRINGWOOD	1.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA, FL 00000	1.4 CITY-ST-ZIP		34232
TITLE	D	2.1 TITLE	☐ Change ☑ Addition	
NAME	BILEK, KARL	2.2 NAME		
STREET ADDRESS	4263 EASTWOOD	2.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL	2.4 CITY-ST-ZIP		34232
TITLE	DS	3.1 TITLE	☐ Change ☑ Addition	
NAME	ROBBINS, LARRY	3.2 NAME		
STREET ADDRESS	1403 FLEETWOOD	3.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL	3.4 CITY-ST-ZIP		34232
TITLE	T	4.1 TITLE	☐ Change ☑ Addition	
NAME	HARNEY, ROBERT	4.2 NAME		
STREET ADDRESS	1880 ORANGEWOOD	4.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA, FL 00000	4.4 CITY-ST-ZIP		34232
TITLE	VD	5.1 TITLE	☐ Change ☑ Addition	
NAME	FINNIMORE, JOHN	5.2 NAME		
STREET ADDRESS	1837 SPRINGWOOD	5.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL	5.4 CITY-ST-ZIP		
TITLE	D	6.1 TITLE	☐ Change ☑ Addition	
NAME	NAIMAN, JAMES	6.2 NAME		
STREET ADDRESS	3833 GATEWOOD	6.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL	6.4 CITY-ST-ZIP		34232

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)(i), 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: Robert Harney — 3-20-95 (813) 377-1763
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0084148