2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 17, 2008 8:00 am Secretary of State

DOCUMENT # 766390 1. Entity Name TIDY ISLAND CONDOMINIUM ASSOCIATION, INC.					04-17-2008 90041 006 ****61.25			
Principal Place of Business 139 TIDY ISLAND BLVD BRADENTON, FL 34210 Address 139 TIDY ISLAND BLVD BRADENTON, FL 34210								
2 Principal P	lace of Business - No P.O. Box #	3. Mailing Address						
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Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		04092008	Chg-NP	CR2E037 (12/0	96)
City & State		City & State			 FEI Number 59-2497 			Applied For Not Applicable
Zip Country		Zip	Zip Country		5. Certificate of	f Status Desired	□ \$8.75	Additional
	6. Name and Address of Current	Registered Agent			7. Name and	Address of New R		,
DEBOER, KANESKY M)				
227 NOKOMIS AVE. S. VENICE, FL 34284-1767				Street Address (P.O. Box Number is Not Acceptable)				
·			City				FL Zip	Code
8. The above	named entity submits this statement for	or the purpose of changing its	registered offic	e or registered	d agent, or both	ı, in the State of Flo		with, and accept
the obligati	ions of registered agent.							
SIGNATURE .								
OIGITATORE S	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE	Registered Agent s	ignature required w	vhen reinstating)		DATE	
1,			npaign Financir ontribution.		\$5.00 May Be Added to Fees	Floi	lake check payab rida Department o	of State
10.	OFFICERS AND DI		11.		DDITIONS/CHA	NGES TO OFFICE	RS AND DIRECTOR	
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12. Thereby certify that the information supplied with this imag does not quality for the exemptions contained in Chapter 11st, rollide statutes. From a 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 orath; 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:

RATHER MY CHILLEY
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #