

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 770302

1. Entity Name

TOWN 'N COUNTRY VILLAS CONDOMINIUM OF TAMPA, INC

FILED
Jan 27, 2000 8:00 am
Secretary of State

01-27-2000 90035 041 ****61.25

Principal Place of Business

Mailing Address

~~8737 TEMPLE TERRACE HWY~~
 TEMPLE TERRACE FL 33637

8737 TEMPLE TERRACE HWY
 TEMPLE TERRACE FL 33637-6727



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

VANGUARD MGMT.
 Suite, Apt. #, etc.
 9300 N. 16 ST.

Same

City & State
 TAMPA, FL

City & State

4. FEI Number

59-2314256

Applied For

Not Applicable

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

THE VANGUARD MANAGEMENT GROUP, INC.
 8737 TEMPLE TERRACE HWY
 TEMPLE TERRACE FL 33637

Name Moyer, Bob

Street Address (P.O. Box Number is Not Acceptable)
 9300 N. 16 ST.

City TAMPA

FL

Zip Code 33612

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1-10-06

FILE NOW:
 FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DVP Delete
 NAME CASTILLO, ALFREDO
 STREET ADDRESS 7323 JACKSON SPRINGS RD
 CITY-ST-ZIP TAMPA FL 33634

TITLE D Change Addition
 NAME Rodriguez, Hosa
 STREET ADDRESS 7315 Jackson Springs Rd.
 CITY-ST-ZIP Tampa, FL 33634

TITLE P Delete
 NAME SMITH, JUSTINE
 STREET ADDRESS 7335 JACKSON SPRINGS RD
 CITY-ST-ZIP TAMPA FL

TITLE Change Addition

TITLE SD Delete
 NAME STOLKI, CHARLENE
 STREET ADDRESS 7337 JACKSON SPRINGS RD
 CITY-ST-ZIP TAMPA FL 33634

TITLE Change Addition

TITLE DT Delete
 NAME BAHNG, SHO
 STREET ADDRESS 7329 JACKSON SPRINGS R
 CITY-ST-ZIP TAMPA FL

TITLE Change Addition

TITLE D Delete
 NAME GUSHEA, PAUL
 STREET ADDRESS 7339 JACKSON SPRINGS RD
 CITY-ST-ZIP TAMPA FL 33634

TITLE Change Addition

TITLE Delete

TITLE T/D Change Addition
 NAME Robinson, Douglas
 STREET ADDRESS 7305 Jackson Springs Rd.
 CITY-ST-ZIP Tampa, FL 33634

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:

M. M. RE MIKE CAVONI Agent

1-11-00

813-930-0036

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CFR2E037 (9/99)