


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2007 8:00 am
Secretary of State

04-24-2007 90018 004 ****61.25

DOCUMENT # N00000006676

1. Entity Name
GRAND OAK AT TARA CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
PROGRESSIVE COMMUNITY MGMT., INC.
1801 GLEN GARY ST.
SARASOTA, FL 34231

Mailing Address
PROGRESSIVE COMMUNITY MGMT., INC.
1801 GLEN GARY ST.
SARASOTA, FL 34231

40079423



2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

01122007 Chg-NP CR2E037 (12/06)

4. FEI Number
59-3718324

Applied For
 Not Applicable

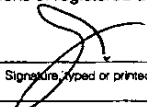
5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
PROGRESSIVE COMMUNITY MGMT., INC.
1801 GLENGARY ST.
SARASOTA, FL 34231

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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  _____
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25
Due by May 1, 2007

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BARNES, JACK 6318 GRAND OAK CIR 104 BRADENTON, FL 34203 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CHRISTO, DON <input checked="" type="checkbox"/> Delete 6310 GRAND OAK CIR 101 BRADENTON, FL 34203
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FREDERICK, RAYMOND <input type="checkbox"/> Delete 6326 GRAND OAK CIR., #101 BRADENTON, FL 34203
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS MARKEL, JIM <input type="checkbox"/> Delete 1801 GLENGARY ST. SARASOTA, FL 34231
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT SUTTON, WILLIAM <input type="checkbox"/> Delete 1801 GLENGARY ST. SARASOTA, FL 34231
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REBHAN, JOSEPH <input type="checkbox"/> Delete 6334 GRAND OAK CIR 102 BRADENTON, FL 34203

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CHRISTO, CINDY <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 6310 GRAND OAK CIR, #101 BRADENTON, FL 34203
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"/> Change <input type="checkbox"/> Addition
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"/> 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:  _____ **Jim MARKEL** 4/10/07 941-921-5393
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #