

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003634

FILED
May 04, 2005
Secretary of State

Entity Name: TIGER POINT PARK BOARD, INC.

Current Principal Place of Business:

3036 GULF BREEZE PKWY
GULF BREEZE, FL 32563

New Principal Place of Business:

Current Mailing Address:

3036 GULF BREEZE PKWY
GULF BREEZE, FL 32563

New Mailing Address:

FEI Number: 59-3724087 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

RADCLIFFE, DAVID
957 VESTAVIA WAY
GULF BREEZE, FL 32563 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RADCLIFFE, DAVID
Address: 957 VESTAVIA WAY
City-St-Zip: GULF BREEZE, FL 32563

Title: VD () Delete
Name: DANNHEISSER, MATT E
Address: 706 FAIRPOINT DR.
City-St-Zip: GULF BREEZE, FL 32561

Title: D () Delete
Name: DAVIS, PAUL
Address: 947 VESTAVIA WAY
City-St-Zip: GULF BREEZE, FL 32563

Title: TD () Delete
Name: BRUNTY, MICHELLE
Address: 3164 AUBURN PKWY
City-St-Zip: GULF BREEZE, FL 32561

Title: SD () Delete
Name: SCHERMERHORN, CLARENCE
Address: 3105 ORIOLE DR
City-St-Zip: GULF BREEZE, FL 32563

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID S RADCLIFFE

PRES

05/04/2005

Electronic Signature of Signing Officer or Director

Date