

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002297

FILED
Sep 05, 2006
Secretary of State

Entity Name: TUSTENUGGEE PLANTATION SOUTH HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

5345 ORTEGA BLVD SUITE 7
JACKSONVILLE, FL 32210

New Principal Place of Business:

PO BOX 866
FORT WHITE, FL 32038

Current Mailing Address:

5345 ORTEGA BLVD SUITE 7
JACKSONVILLE, FL 32210

New Mailing Address:

PO BOX 866
FORT WHITE, FL 32038

FEI Number: **FEI Number Applied For (X)** **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:

WEDEKIND, LEE D JR
5345 ORTEGA BLVD SUITE 7
JACKSONVILLE, FL 32210 US

Name and Address of New Registered Agent:

MILLER, MICHAEL C
PO BOX 866
FORT WHITE, FL 32038 US

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: MICHAEL C. MILLER

09/05/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WEDEKIND, LEE D JR
Address: 5345 ORTEGA BLVD
City-St-Zip: JACKSONVILLE, FL 32210

Title: D () Delete
Name: LANE, JAMES T JR
Address: 5345 ORTEGA BLVD
City-St-Zip: JACKSONVILLE, FL 32210

Title: D () Delete
Name: VARGAS, ERNIE
Address: 5345 ORTEGA BLVD
City-St-Zip: JACKSONVILLE, FL 32210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MILLER, MICHAEL C
Address: PO BOX 866
City-St-Zip: FORT WHITE, FL 32038

Title: D (X) Change () Addition
Name: PENTOLINO, NORMAN
Address: PO BOX 866
City-St-Zip: FORT WHITE, FL 32038

Title: D (X) Change () Addition
Name: MCRAV, YVONNE
Address: PO BOX 866
City-St-Zip: FORT WHITE, FL 32038

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: MICHAEL C. MILLER

D

09/05/2006

Electronic Signature of Signing Officer or Director

Date