## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000002297

FILED Feb 03, 2009 Secretary of State

Entity Name: TUSTENUGGEE PLANTATION SOUTH HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

226 SW BEEHIVE CT.

FORT WHITE, FL 32038

234 SW HONEYCOMB CT
FORT WHITE, FL 32038

Current Mailing Address: 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 (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MILLER, MICHAEL C
226 SW BEEHIVE CT.
FORT WHITE, FL 32038 US
JURCZEWSKY, KEITH A
234 SW HONEYCOMB CT
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: KEITH JURCZEWSKY 02/03/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: D () Delete Title: P (X) Change () Addition

Name: MILLER, MICHAEL C Name: JURCZEWSKY, KEITH A

Address: PO BOX 866 Address: PO BOX 866

City-St-Zip: FORT WHITE, FL 32038 City-St-Zip: FORT WHITE, FL 32038

Title: D ( ) Delete Title: VP (X) Change ( ) Addition

Name: PENTOLINO, NORMAN Name: HARRIS, JJ
Address: PO BOX 866 Address: PO BOX 866

City-St-Zip: FORT WHITE, FL 32038 City-St-Zip: FORT WHITE, FL 32038

Title: D () Delete Title: () Change () Addition

 Name:
 MCRAE, YVONE
 Name:

 Address:
 PO BOX 866
 Address:

 City-St-Zip:
 FORT WHITE, FL 32038
 City-St-Zip:

Title: ( ) Delete Title: S ( ) Change (X) Addition

Name: Name: KIPPER, PATRICIA Address: Address: PO BOX 866

City-St-Zip: City-St-Zip: FORT WHITE, FL 32038

I hereby certify that the information supplied with this filing does not qualify 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: KEITH JURCZEWSKY P 02/03/2009