


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 21, 2007 8:00 am
Secretary of State

03-21-2007 90043 044 ****61.25

DOCUMENT # N02000002493 1. Entity Name TAHITIAN PLACE HOME OWNERS ASSOCIATION, INC.					
Principal Place of Business 1980 TAHITIAN PLACE #22 DUNEDIN FL 34698				Mailing Address 1968 BAYSHORE BLVD. DUNEDIN FL 34698	
2. Principal Place of Business - No P.O. Box # 1980 Tahitian Place <small>Suite, Apt. #, etc.</small>		3. Mailing Address 1980 Tahitian Pl. # 18 <small>Suite, Apt. #, etc.</small>			
City & State Dunedin, FL		City & State Dunedin, FL		4. FEI Number NO-T APPLICABLE	
Zip 34698	Country Pinellas	Zip 34698	Country Pinellas	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CIANFRONE, JOSEPH R 1964 BAYSHORE BLVD DUNEDIN FL 34698				7. Name and Address of New Registered Agent Name Murietta Slaven Street Address (P.O. Box Number is Not Acceptable) 1980 Tahitian Pl. # 18 City Dunedin FL Zip Code 34698	
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. Murietta Slaven, Sec. SIGNATURE <i>Murietta Slaven - Sec.</i> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW: FEE IS \$61.25 Due By May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	V SLAVEN, JAMES 1980 TAHITIAN PL #18 DUNEDIN FL 34698	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY- ST- ZIP	ST SLAVEN, MURIETTA 1980 TAHITIAN PL #18 DUNEDIN FL 34698	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY- ST- ZIP	P EVANS, WM O II 1980 TAHITIAN PL #22 DUNEDIN FL 34698	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY- ST- ZIP	Lynn Grey Pres. 1980 Tahitian Pl. # 31 Dunedin, FL. 34698	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY- ST- ZIP	Sharon Wright # 10 V. Pres. 1980 Tahitian Pl. Dunedin, FL. 34698	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY- ST- ZIP	(Empty)	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY- ST- ZIP	(Empty)	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY- ST- ZIP	(Empty)	<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 Section 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: <i>Murietta Slaven - Sec.</i> 3-12-07 (121) 739-2777					