

**2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 16, 2011  
Secretary of State**

DOCUMENT# N02000005148

**Entity Name:** TUSKAWILLA OFFICE PARK OWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

2000 TOWN PLAZA COURT  
WINTER SPRINGS, FL 32708

**New Principal Place of Business:**

**Current Mailing Address:**

2000 TOWN PLAZA COURT  
WINTER SPRINGS, FL 32708

**New Mailing Address:**

FEI Number: 82-0555217      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GALLOWAY, MICHAEL  
2000 TOWN PLAZA COURT  
WINTER SPRINGS, FL 32708      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: STD  
Name: SINGHOFEN, PETER J  
Address: 3308 FISHERMANS COVE  
City-St-Zip: WINTER PARK, FL 32792

Title: PD  
Name: SCHILKE, RICHARD  
Address: 1089 CLINGING VINE PLACE  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: VPD  
Name: FRICKE, BRIAN L  
Address: 102 BRIDGEWOOD COURT  
City-St-Zip: WINTER SPRINGS, FL 32708

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL GALLOWAY

RA

02/16/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date