

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007374

FILED
Mar 23, 2009
Secretary of State

Entity Name: TARPON RIVER VILLAGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

709 SW 4TH AVE
FORT LAUDERDALE, FL 33315

New Principal Place of Business:

705-725 SW 4TH AVE
FORT LAUDERDALE, FL 33315

Current Mailing Address:

ONE FINANCIAL PLAZA
SUITE 2001
FORT LAUDERDALE, FL 33394 US

New Mailing Address:

FEI Number: 37-1535753 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BURGESS, DAVID
ONE FINANCIAL PLAZA
SUITE 2001Y
FORT LAUDERDALE, FL 33394 US

Name and Address of New Registered Agent:

BURGESS, DAVID
ONE FINANCIAL PLAZA
SUITE 2001
FORT LAUDERDALE, FL 33394 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: DAVID BURGESS

03/23/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WOOD, SHANNON
Address: 717 SW 4TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: S () Delete
Name: MILLER, DAVID
Address: 709 S.W. 4TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: T () Delete
Name: MACGILLIVARDY, DARREN
Address: 719 SW 4TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33315

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: IRVINE, KATHERINE
Address: 411 SW 8TH PLACE
City-St-Zip: FORT LAUDERDALE, FL 33315

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: DAVID BURGESS

RA

03/23/2009

Electronic Signature of Signing Officer or Director

Date