

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003398

FILED  
Aug 17, 2009  
Secretary of State

Entity Name: TARA ESTATES WATER SYSTEM, INC.

## Current Principal Place of Business:

4343 ANGELA DR  
MARIANNA, FL 32446

## New Principal Place of Business:

## Current Mailing Address:

4343 ANGELA DR  
MARIANNA, FL 32446

## New Mailing Address:

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) 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:

KLIENHANS, GLADYS  
4343 ANGELA DR  
MARIANNA, FL 32446 US

## Name and Address of New Registered Agent:

KLIENHANS, GLADYS W  
4343 ANGELA DR  
MARIANNA, FL 32446 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: GLADYS W. KLEINHANS

08/17/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: MORGAN, CHUCK  
Address: 4384 ANGELA DR  
City-St-Zip: MARIANNA, FL 32446

Title: DVST ( ) Delete  
Name: KLEINHANS, GLADYS W  
Address: 4384 ANGELA DR  
City-St-Zip: MARIANNA, FL 32446

Title: D ( ) Delete  
Name: PETTIS, RICK  
Address: 4393 ANGELA DR  
City-St-Zip: MARIANNA, FL 32446

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: GLADYS W. KLEINHANS

DVST

08/17/2009

Electronic Signature of Signing Officer or Director

Date