

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03180

FILED  
Apr 08, 2010  
Secretary of State

**Entity Name:** TANTARA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O ISLAND MANAGEMENT GROUP  
711 TARPON BAY RD  
SANIBEL, FL 33957 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O ISLAND MANAGEMENT GROUP  
P.O. BOX 100  
SANIBEL, FL 33957 US

**New Mailing Address:**

**FEI Number:** 59-2745371

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MACKESY, STEVEN J  
C/O ISLAND MANAGEMENT GROUP  
711 TARPON BAY ROAD  
SANIBEL, FL 33957 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: VD  
Name: AUFDERHEIDE, AUGUSTINE R  
Address: 6436 MAD RIVER RD.  
City-St-Zip: DAYTON, OH 45459

Title: STD  
Name: GEOGHAN, JOSEPH  
Address: 18 EAST RAMPASTURE RD  
City-St-Zip: HAMPTON BAYS, NY 11946

Title: D  
Name: BACHMAN, WILLIAM  
Address: 3804 TIMBER VIEW WAY  
City-St-Zip: REISTERSTOWN, MD 21136

Title: PD  
Name: WILLIAMS, MARY  
Address: 3049 WEST GULF DR 101  
City-St-Zip: SANIBEL, FL 33957

Title: D  
Name: HANSON, KEN  
Address: 126 GULF VIEW LANE  
City-St-Zip: WASHINGTON, IA 52353

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: MARY WILLIAMS

PD

04/08/2010

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

\_\_\_\_\_  
Date