FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAR -6 PM 1:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N03982 (8)

1. Corporation Name

TARA VILLAGE RESIDENTS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
90 TARA LANE TARA VILLAGE LEESBURG FL 34788	4 SCARLET PLACE TARA VILLAGE LEESBURG FL 34788 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/02/1984
3a. Date of Last Report: 04/07/1994
4. FEI Number: 59-2448772 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 90 Tara Lane	26 97 Butler Circle
22 Suite, Apt. #, etc. Tara Village	27 Suite, Apt. #, etc. Tara Village
23 City & State Leesburg, Fla	28 City & State Leesburg, Fla
24 Zip 34788 25 Country Lake	29 Zip 34788 30 Country Lake

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
BENDER, DOROTHY M. 4 SCARLET PLACE TARA VILLAGE LEESBURG FL 34788	81 Name: Mary Offenbecker 82 Street Address (P.O. Box Number is Not Acceptable): 97 Butler Circle 83: Tara Village 84 City: Leesburg FL 85 Zip Code: 34788

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Mary Offenbecker - MARY OFFENBECKER 3-1-95
(Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	P.D. ☒ Change ☐ Addition
NAME	SMITH, IONA	12 NAME	CHRISTENSEN Robert
STREET ADDRESS	28 RHETT RD., TARA VILLAGE	13 STREET ADDRESS	98 Butler Circle, Tara Village
CITY-ST-ZIP	LEESBURG FL	14 CITY-ST-ZIP	Leesburg, FLA. 34788
TITLE	FVPD	21 TITLE	F.V.P.D. ☐ Change ☐ Addition
NAME	IRWIN, RICHARD	22 NAME	Erwin Richard
STREET ADDRESS	23 RHETT RD., TARA VILLAGE	23 STREET ADDRESS	23 Rhett Rd, Tara Village
CITY-ST-ZIP	LEESBURG FL	24 CITY-ST-ZIP	Leesburg, FLA. 34788
TITLE	SVPD	31 TITLE	S.V.P.D. ☒ Change ☐ Addition
NAME	CHRISTENSEN, ROBERT	32 NAME	Smith Iona
STREET ADDRESS	98 BUTLER CIR., TARA VILLAGE	33 STREET ADDRESS	28 Rhett Rd, Tara Village
CITY-ST-ZIP	LEESBURG FL	34 CITY-ST-ZIP	Leesburg, FLA. 34788
TITLE	TD	41 TITLE	T.D. ☒ Change ☐ Addition
NAME	BENDER, DOROTHY M.	42 NAME	MARY Offenbecker
STREET ADDRESS	4 SCARLET PL-TARA VILLAGE	43 STREET ADDRESS	97 Butler Circle, Tara Village
CITY-ST-ZIP	LEESBURG FL	44 CITY-ST-ZIP	Leesburg, FLA. 34788
TITLE	SD	51 TITLE	S.D. ☒ Change ☐ Addition
NAME	HAYNES, BESSID	52 NAME	Olive Oesch
STREET ADDRESS	86 TARA LANE -TARA VILLAGE	53 STREET ADDRESS	30 Astley Ave, Tara Village
CITY-ST-ZIP	LEESBURG FL	54 CITY-ST-ZIP	Leesburg, FLA. 34788
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Mary Offenbecker 3-1-95 904-326-2426
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number
MARY OFFENBECKER

000001