

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 06 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

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  
US97 BUTLER CIRCLE  
TARA VILLAGE  
LEESBURG FL 34788-2542  
US

2. Principal Place of Business

2a. Mailing Address

21 111 Tara Lane

26 82 Butler Circle

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Tara Village

27 Tara Village

City &amp; State

City &amp; State

23 Leesburg FL

28 Leesburg FL

Zip

Country

Zip

Country

24 34788

25 Lake

29 34788

30 Lake

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

OFFENBECKER, MARY  
97 BUTLER CIRCLE  
TARA VILLAGE  
LEESBURG FL 34788

81 Name

Mary Morey

82 Street Address (P.O. Box Number is Not Acceptable)

82 Butler Circle

83 Tara Village

84 City

Leesburg

FL

85 Zip Code  
34788

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

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 SVPD ☒ DELETE

NAME TOWNSEND, JOSEPHINE

STREET ADDRESS 88 TARA LANE

CITY-ST-ZIP LEESBURG FL

TITLE FVPD ☒ DELETE

NAME IRWIN, RICHARD

STREET ADDRESS 23 RHETT RD., TARA VILLAGE

CITY-ST-ZIP LEESBURG FL 34788

TITLE PD ☒ DELETE

NAME CHRISTENSEN, ROBERT

STREET ADDRESS 98 BUTLER CIR., TARA VILLAGE

CITY-ST-ZIP LEESBURG FL 34788

TITLE TD ☐ DELETE

NAME OFFENBECKER, MARY

STREET ADDRESS 97 BUTLER CIRCLE, TARA VILLAGE

CITY-ST-ZIP LEESBURG FL 34788

TITLE SD ☒ DELETE

NAME OESCH, OLIVE

STREET ADDRESS 30 ASLEY AVE., TARA VILLAGE

CITY-ST-ZIP LEESBURG FL 34788

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.1 TITLE PD ☐ Change ☒ Addition

1.2 NAME Fred Wright

1.3 STREET ADDRESS 60 Plantation Road

1.4 CITY-ST-ZIP Leesburg FL 34788

2.1 TITLE FVPD ☐ Change ☒ Addition

2.2 NAME Dolores Wilkins

2.3 STREET ADDRESS 110 Butler Circle W

2.4 CITY-ST-ZIP Leesburg FL 34788

3.1 TITLE SVPD ☐ Change ☒ Addition

3.2 NAME George Tom Cole

3.3 STREET ADDRESS 42 O'Hara Street

3.4 CITY-ST-ZIP Leesburg FL 34788

4.1 TITLE SD ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE TD ☐ Change ☒ Addition

5.2 NAME Mary Morey

5.3 STREET ADDRESS 82 Butler Circle E

5.4 CITY-ST-ZIP Leesburg FL 34788

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER

MARY MOREY

2/27/97

352/28 4442

CR2E037 (9/96)