

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001630

FILED
Apr 26, 2010
Secretary of State

Entity Name: TIOGA TOWN CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

105 SW 128TH STREET
TIOGA, FL 32669

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 13453
GAINESVILLE, FL 32604

New Mailing Address:

FEI Number: 86-1100040

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIAZ, LUIS A
105 SW 128TH STREET
SUITE 200
TIOGA, FL 32669 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: P
Name: DIAZ, LUIS A
Address: P.O. BOX 13453
City-St-Zip: GAINESVILLE, FL 32604

Title: VP
Name: DIAZ, MIGUEL J
Address: P.O. BOX 13453
City-St-Zip: GAINESVILLE, FL 32604

Title: VP
Name: CANNELLA, LUISA G
Address: P.O. BOX 13453
City-St-Zip: GAINESVILLE, FL 32604

Title: S
Name: FERRERO, HORST
Address: P.O. BOX 13453
City-St-Zip: GAINESVILLE, FL 32604

Title: T
Name: DIAZ, ANNELIESE
Address: P.O. BOX 13453
City-St-Zip: GAINESVILLE, FL 32604

Title: D
Name: LEVY, GILBERT
Address: P.O. BOX 13453
City-St-Zip: GAINESVILLE, FL 32604

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: LUIS DIAZ

P

04/26/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date