

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05825

FILED
Jan 18, 2009
Secretary of State

Entity Name: TALIA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

39132 CR 54 E
#2014
ZEPHYRHILLS, FL 33542 US

New Principal Place of Business:

Current Mailing Address:

39132 CR 54 E
#2014
ZEPHYRHILLS, FL 33542 US

New Mailing Address:

FEI Number: 59-2777150 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LEITZKE, THOMAS
6030 RIDGEWAY DR
ZEPHYRHILLS, FL 33541 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: PD () Delete
Name: LEITZKE, THOMAS W
Address: 6030 RIDGE WAY DR
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: D () Delete
Name: MULKEY, CHARLES
Address: 39132 C.R. 54 E., 2206
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: STD () Delete
Name: LOUDEN, LAVERNE
Address: 39132 C.R. 54 E., 2256
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: STD () Delete
Name: CLARK, JANICE L
Address: 39132 C.R. 54 E., 2072
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: D () Delete
Name: WETMORE, SCOTT
Address: 5018 N. CLARK AVE.
City-St-Zip: TAMPA, FL 336146532

Title: VD () Delete
Name: STEVENS, DEBBY
Address: 39132 C.R. 54 E., 2080
City-St-Zip: ZEPHYRHILLS, FL 33542

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:

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

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

Title: VD (X) Change () Addition
Name: FERRIS, STACEY
Address: 39132 C.R. 54 E., 2080
City-St-Zip: ZEPHYRHILLS, FL 33542

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: JANICE L. CLARK

STD

01/18/2009

Electronic Signature of Signing Officer or Director

Date