## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000007009

FILED Apr 02, 2007 Secretary of State

Entity Name: TUMBLIN CREEK HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:** New Principal Place of Business:

1747 VAN BUREN STREET STE 700 2450 HOLLYWOOD BLVD HOLLYWOOD, FL 33020

SUITE 310

HOLLYWOOD, FL 33020

**Current Mailing Address:** New Mailing Address:

1747 VAN BUREN STREET STE 700 2450 HOLLYWOOD BLVD HOLLYWOOD, FL 33020 SUITE 310

HOLLYWOOD, FL 33020

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

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

KIMBERLY S. DAISE, P.A KIMBERLY S. DAISE, P.A. 1747 VAN BUREN STREET STE 700 2450 HOLLYWOOD BLVD HOLLYWOOD, FL 33020 SUITE 310

HOLLYWOOD, FL 33020 US

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: KIMBERLY S DAISE 04/02/2007

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete

DAISE, KIMBERLY S DAISE, KIMBERLY S Name: Name:

1747 VAN BUREN STREET STE 700 Address: 2450 HOLLYWOOD BLVD SUITE 310 Address:

City-St-Zip: HOLLYWOOD, FL 33020 City-St-Zip: HOLLYWOOD, FL 33020

(X) Change ( ) Addition Title: ( ) Delete Title:

BANDES, JOSEPH Name: BANDES, JOSEPH Name:

Address: 1747 VAN BUREN STREET STE 700 Address: 2450 HOLLYWOOD BLVD SUITE 310

City-St-Zip: HOLLYWOOD, FL 33020 City-St-Zip: HOLLYWOOD, FL 33020

Title: DST () Delete Title: DST (X) Change ( ) Addition BANDES, AIDA Name: BANDES, AIDA Name:

1747 VAN BUREN STREET STE 700 2450 HOLLYWOOD BLVD SUITE 310 Address: Address:

City-St-Zip: HOLLYWOOD, FL 33020 City-St-Zip: HOLLYWOOD, FL 33020

I hereby certify that the information supplied with this filing does not qualify for the 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: KIMBERLY S DAISE Ρ 04/02/2007