

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06079

FILED  
May 01, 2005  
Secretary of State

**Entity Name:** TIGER LAKE SUBDIVISION PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

4509 LAKE KOTSA DR  
LAKE WALES, FL 33898 US

**New Principal Place of Business:**

**Current Mailing Address:**

4509 LAKE KOTSA DR  
LAKE WALES, FL 33898 US

**New Mailing Address:**

**FEI Number:** 59-2532718 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

MYERS, C B III  
130 E CENTRAL AVE  
LAKE WALES, FL 33853 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 ( ) Delete  
Name: CARROLL, CULLEN  
Address: 4509 LAKE KOTSA DRIVE  
City-St-Zip: LAKE WALES, FL 33898

Title: VP ( ) Delete  
Name: GILBERTSON, CHARLES  
Address: 4189 LAKE KOTSA DR.  
City-St-Zip: LAKE WALES, FL 33898

Title: ST ( ) Delete  
Name: PTACK, JOYE  
Address: 4509 LAKE KOTSA DR  
City-St-Zip: LAKE WALES, FL 33898

Title: D ( ) Delete  
Name: HUTCHESON, SUE  
Address: 4629 LAKE KOTSA DR  
City-St-Zip: LAKE WALES, FL 33898

Title: D ( ) Delete  
Name: WHITWORTH, DON  
Address: 328 MORNINGSIDE DR  
City-St-Zip: LAKELAND, FL 33803

Title: D ( ) Delete  
Name: BANEY, RICK  
Address: 5010 SW 196 LN  
City-St-Zip: FT. LAUDERDALE, FL 33332

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOYE PTACK

ST

05/01/2005

Electronic Signature of Signing Officer or Director

Date