

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14946

FILED
Feb 28, 2012
Secretary of State

Entity Name: TUSKAWILLA SPRINGS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

POST OFFICE 195873
WINTER SPRINGS, FL 327195873

New Principal Place of Business:

POST OFFICE 195873
WINTER SPRINGS, FL 32719 58

Current Mailing Address:

POST OFFICE 195873
WINTER SPRINGS, FL 327195873

New Mailing Address:

FEI Number: 59-2677528 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HINKLE, KAREN M
796 WINDWILLOW CIRCLE
WINTER SPRINGS, FL 32708 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: TRES
Name: HINKLE, KAREN M
Address: 796 WINDWILLOW CIRCLE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: PRES
Name: WELLS, TRACY
Address: 656 WYCKLIFFE PLACE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: VP
Name: DENNIS, PAUL
Address: 705 WINDWILLOW CIRCLE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: SECT
Name: SIMON, PAUL
Address: 694 SAMUELSON COURT
City-St-Zip: WINTER SPRINGS, FL 32708

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: TRACY WELLS

PRES

02/28/2012

Electronic Signature of Signing Officer or Director

Date