


2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

FILED
Feb 23, 2007 8:00 am
Secretary of State

02-23-2007 90028 002 ****61.25

DOCUMENT # N23426

1. Entity Name
TUSKAWILLA TRAILS HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
10158 MAITLAND CTR COMMANDS BLVD
MAITLAND, FL 32751 US

Mailing Address
308 ARAPANO TRAIL
WINTER SPRINGS, FL 32708 US

2. Principal Place of Business - No P.O. Box #
Suite, Apt. #, etc.


3. Mailing Address
Suite, Apt. #, etc.

City & State
City & State

Zip
Country

Zip
Country

60018643



02092007 Chg-NP CR2E037 (12/06)

4. FEI Number
59-2760670

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

THOREEN, W. RICHARD
1015 MAITLAND CENTER COMMONS BLVD
MAITLAND, FL 32751

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	PLUM, BILL	
STREET ADDRESS	1091 CHEROKEE VILLAGE TR	
CITY-ST-ZIP	WINTER SPRINGS, FL 32708	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	RONE, DAVID	
STREET ADDRESS	347 MOHAWK TRAIL	
CITY-ST-ZIP	WINTER SPRINGS, FL 32708	
TITLE	SD	<input type="checkbox"/> Delete
NAME	FALLAN, PAT	
STREET ADDRESS	319 MOHAWK TRAIL	
CITY-ST-ZIP	WINTER SPRINGS, FL 32708	
TITLE	T	<input type="checkbox"/> Delete
NAME	EVICCI, JAN	
STREET ADDRESS	308 ARAPANO TRAIL	
CITY-ST-ZIP	WINTER SPRINGS, FL 327083	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BOULICAULT, LOIS	
STREET ADDRESS	370 PAWNE TRAIL	
CITY-ST-ZIP	WINTER SPRINGS, FL 32708	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	LAMAY, DRU	
STREET ADDRESS	359 MOHAWK TRAIL	
CITY-ST-ZIP	WINTER SPRINGS, FL 32708	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GARY MIRAMONTI	
STREET ADDRESS	319 MOHAWK TRAIL	
CITY-ST-ZIP	WINTER SPRINGS, FL 32708	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ROBERT MEEKS	
STREET ADDRESS	313 ARAPANO TRAIL	
CITY-ST-ZIP	WINTER SPRINGS FL 32708	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PRESIDENT/TREASURER	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JOE SACCA	
STREET ADDRESS	1080 CHEROKEE VILLAGE TRAIL	
CITY-ST-ZIP	WINTER SPRINGS FL 32708	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CARMEN MEADOWS	
STREET ADDRESS	321 ARAPANO TRAIL	
CITY-ST-ZIP	WINTER SPRINGS, FL 32708	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Pat Fallan 2-14-2007 407-3278336

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #