

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2003 8:00 am
Secretary of State

02-05-2003 90129 044 ****61.25

DOCUMENT # N27773

1. Entity Name

**THE RESERVE AT LAKE TARPON COMMUNITY ASSOCIATION
, INC.**



Principal Place of Business

**GOLDSTAR MANAGEMENT CO INC.
2435 US HWY 19 STE 270
HOLIDAY FL 34691
US**

Mailing Address

**GOLDSTAR MANAGEMENT CO INC.
2435 US HWY 19 STE 270
HOLIDAY FL 34691
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2925191**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GOLDMAN, WILLIAM A
2435 US HWY 19 STE 270
HOLIDAY FL 34691**

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]*
Signature, typed or printed name of registered agent and title if applicable.

WILLIAM GOLDMAN
(NOTE: Registered Agent signature required when reinstating)

1/29/03
DATE

FILE NOW: FEE IS \$61.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SCOTT, CYNTHIA 3873 TALAH DRIVE PALM HARBOR FL 34684	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD CHRONIS, TED 3983 TARIAN COURT PALM HARBOR FL 34684	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD REID, MARILYN 3895 TARIAN COURT PALM HARBOR FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MOORE, VANN 3898 TARIAN COURT PALM HARBOR FL 34684	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILLER, JANE 3933 TARIAN COURT PALM HARBOR FL 34684	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SCOTT, CYNTHIA 3873 TALAH DRIVE PALM HARBOR, FL 34684	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CHRONIS, TED 3983 TARIAN COURT PALM HARBOR, FL 34684	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD JOAN GODWIN 3874 TALAH DRIVE PALM HARBOR, FL 34684	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Temko, Peter 3925 TARIAN DR PALM HARBOR, FL 34684	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARVEY POLLAK 3914 TARIAN COURT PALM HARBOR, FL 34684	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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: *[Signature]* **SIGNATURE REQUIRED, President 1/28/03 789-0280**

CR2E037 (10/02)