## FILED May 05, 2008 8:00 am Secretary of State

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SIGNATURE AND TOPED ON PRINTED MAKE OF SIGNING OFFICER OR DIRECTOR

								, 5t	cretary	/ UI Sta	ue	
DOCUMENT # N29247  1. Entity Name TARA MASTER ASSOCIATION, INC.									-05-2008 9025			
Principal Place of Business 6602 DREWERY'S BLUFF BRADENTON, FL 34203 US  Mailing Address 6602 DREWERY'S BL BRADENTON, FL 34203 US  BRADENTON, FL 34203												
2. Principal Place of Business - No P.O. Box #				3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.					04112008 C	hg-NP C	CR2E037 (12/06)		
City & State			City & State					4. FEI Number 65-012004	 43		pplied For ot Applicable	
Zip	Country		Zip Cou			ntry				\$8.75 Ad		
	6. Name	and Address of Current	Registen	ed Agent				7. Name and Add	ress of New Regis	stered Agent		
						Name						
GREISING, ANTHONY 6602 DREWERY'S BLUFF BRADENTON, FL 34203						Street Address (P.O. Box Number is Not Acceptable)						
					}	City				FL Zip Coo	de ,	
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 app	oficable. (NOTE:	Registered	Agent signal	ture required	when reinstating)	<del></del>	DATE		
-									<del>,</del>			
	-	e is \$61.25 fay 1, 2008	•	<ol> <li>Election Cam;</li> <li>Trust Fund Co</li> </ol>			□ <sup>.</sup>	\$5.00 May Be Added to Fees		check payable to Department of S		
10.		OFFICERS AND DIF	RECTORS		11.			DDITIONS/CHANG	ES TO OFFICERS A	AND DIRECTORS IN	V 10	
TITLE	P Delete				TITLE		D Change Add					
NAME	4	., WILLARD				NAME RUSSEll, Willard STREET ADDRESS GGGZ DIEW: 4'S Bluff						
STREET ADDRESS		WRY'S BLUFF	4									
CITY-ST-ZIP	<b>└</b>	TON, FL 34203			-	ST-ZIP		iclen ton	FC 34W3			
TITLE	VP	. WILLIAM		☐ Delete	TITLE		5	S. J. O. 16 2	_	<mark>∕С</mark> Сһалде	Addition	
NAME STREET ADDRESS	1	RY'S BLUFF		NAME COS STREET ADDRESS GG			oz Diorus Bieff					
CITY-ST-ZIP	1	TON, FL 34203			CITY-ST-ZIP B CO			stoil William 2 Diory's Bloff adenton 1= 6 34203				
TITLE	s			☐ Delete	TITLE					☐ Change	☐ Addition	
NAME	LANE, JO	HN			NAME		<u> </u>				_	
STREET ADDRESS CITY-ST-ZIP		WRY'S BLUFF TON, FL 34203			STREE	T ADDRESS ST-ZIP		مرجر يمتعيب الدا	. ۱ جیم نیز		~	
TITLE	Ť	·		☐ Delete	TITLE		2			☐ Change	Addition	
NAME	WOOLLE	Y, CATHY			NAME		CENI	ad, Goorge 2 Drewey	2/55			
STREET ADDRESS		WRY'S BLUFF					660	2 Drewiy	1510 th			
CITY-ST-ZIP	BRADENT	ON, FL 34203			CITY-S	ST-ZIP		denton F	<u>c 34703</u>	<u>-</u>		
TITLE				Delete	TITLE		ρ	. 1		Change	Addition .	
name Street address					NAME	T ADDRESS	UOH	erty Joe	310 <del>11</del>			
CITY-ST-ZIP					CITY-		2	denton.	FC 34203			
TITLE				☐ Delete	TITLE		D	ZZZY IV.Y	,	☐ Change	Addition	
NAME				DONNE	NAME			ort Phil				
STREET ADDRESS						ADDRESS	660	art, Phil 2 Drewry	15 Bloff	-		
CITY-ST-ZIP					CITY-S	ST-ZIP	30	denton,	FL 3420	<u> </u>		
of the cor	on this repor poration or th	a information supplied with t or supplemental report is the receiver or trustee emport tohment with an address, w	true and wered to	accurate and that my execute this report a	/ sianati	ire shall n	ontained ave the s	in Chapter 119, Fio ame legal effect as	rida Statutes. I furth if made under oath:	er certify that the in that I am an officer	or director	
SIGNATURE: (941) 756-7775												
<del></del>	- · · · ·	SIGNATURE AND TYPED OR P	UNTED NAM	E OF SIGNING OFFICER OF	R DIRECTO	HR.			Date	Daytime Phone #	[	

## ATTACHMENT TARA MASTER ASSOCIATION

6602 Drewry's Bluff • Bradenton, Florida 34203 (941) 756-7775

40097308

5/1/2008

Tara Master Association 6602 Drewry's Bluff Bradenton, FL 34203

Florida Department of State Division of Corporations PO Box 1500 Tallahassee, FL 32302-1500

Re: DOC #N29247

Attached please find a copy of the original application that was previously submitted with our check dated April 11, 2008 and returned to us on April 30, 2008. Thank you.

Maria Canterbury

Maria Cantibury Accounts Payable