

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31540

FILED
Apr 22, 2009
Secretary of State

Entity Name: TARAWOOD HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

10400 DREW BRYANT DR.
FLORAL CITY, FL 34436 US

New Principal Place of Business:

10400 S. DREW BRYANT CIR
FLORAL CITY, FL 34436 US

Current Mailing Address:

1366 WHITFIELD AVE
SARASOTA, FL 34243 US

New Mailing Address:

10400 S. DREW BRYANT CIR
FLORAL CITY, FL 34436 US

FEI Number: 59-2957121

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, JEANNE
1366 WHITFIELD AVE
SARASOTA, FL 34243 US

Name and Address of New Registered Agent:

GARCIA, CAROLYNN
1991 MAIN STREET
BOX 183
SARASOTA, FL 34236 US

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: CAROLYNN GARCIA

04/22/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: CLARK, FREDERICK N
Address: 1366 WHITFIELD AVE
City-St-Zip: SARASOTA, FL 34237 US

Title: V () Delete
Name: SMITH, JEANNE
Address: 1366 WHITFIELD AVE
City-St-Zip: SARASOTA, FL 34237 US

Title: TR () Delete
Name: KURTZ, EDNA
Address: 10715 DREW BRYANT CIRCLE
City-St-Zip: FLORAL CITY, FL 34436

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SMITH, PATRICIA
Address: 10474 S. DREW BRYANT CIRCLE
City-St-Zip: FLORAL CITY, FL 34436 US

Title: VP (X) Change () Addition
Name: CIFERNO, JIM
Address: 10441 S. DREW BRYANT CIRCLE
City-St-Zip: FLORAL CITY, FL 34436 US

Title: TR (X) Change () Addition
Name: GARCIA, CAROLYNN
Address: 1991 MAIN STREET, BOX 183
City-St-Zip: SARASOTA, FL 34236

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: CAROLYNN GARCIA

TR

04/22/2009

Electronic Signature of Signing Officer or Director

Date