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

## DOCUMENT # N31616

1. Entity Name

## TARA VERANDAS COMMONS ASSOCIATION, INC.



FILED Apr 21, 2003 8:00 am Secretary of State

04-21-2003 90367 031 \*\*\*\*61.25

Principal Place of Business HARMONY MGMT 4400 EL CONQUISTADOR PKWY BRADENTON FL 34210				Mailing Address HARMONY MGMT 4400 EL CONOUISTADOR PKWY BRADENTON FL 34210				)   12000000000000000000000000000000000000				
2. Principal Place of Business				3. Mailing Address								
Suite, Apt. #, etc.				Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES				
City & State			City & State					4. FEI Number 65-0125426				oplied For
Zip Country			Zip Cor			ıntry	5. Certificate of Status Desired See Requ			8.75 Ad	ditional	
6. Name and Address of Current F				egistered Agent			7. Name and Address of New Registered Agent					
						-Name-						
HARMONY MANAGEMENT 4400 EL CONQUISTADOR PKWY STE 1						Street Address (P.O. Box Number is Not Acceptable)						
BRADENTON FL 34282										FL	Zip Coc	le
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												
FILE NOW: FEE IS \$61.25								\$5.00 May Be Added to Fees  Make Check Payable to Florida Department of State  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WACHTER, WILBE 6609 STONE RIVE BRADENTON FL			☐ Delete			67	Braden	lberth ne Rue to	FL 34		Addition
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12. Thereby 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: X STATUS STATUS