## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36520

FILED Mar 13, 2007 Secretary of State

Entity Name: TACITO CREEK HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

11379 TACITO CREEK DRIVE 11374 TACITO CREEK DRIVE S. JACKSONVILLE, FL 32223 JACKSONVILLE, FL 32223

**Current Mailing Address: New Mailing Address:** 

11379 TACITO CREEK DRIVE 11374 TACITO CREEK DRIVE S JACKSONVILLE, FL 32223 US JACKSONVILLE, FL 32223

FEI Number: 59-3049358 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BAMBACUS, RON STRATHMANN, DAVE 11374 TACITO CREEK DRIVE SOUTH 11379 TACITO CREEK DRIVE SOUTH JACKSONVILLE, FL 32223 JACKSONVILLE, FL 32223

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: RA 03/13/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PSD (X) Change ( ) Addition () Delete

BAMBACUS, RON STRATHMANN, DAVE Name: Name:

11379 TACITO CREEK DRIVE SOUTH Address: 11374 TACITO CREEK DRIVE SOUTH Address:

City-St-Zip: JACKSONVILLE, FL 32223 City-St-Zip: JACKSONVILLE, FL 32223

(X) Change ( ) Addition Title: VTD () Delete Title: LEFFLER, ANNETTE Name: HUGHES, DEBBIE Name:

Address: 2774 TACITO CREEK DRIVE WEST Address: 11368 SHADY BROOK LANE

City-St-Zip: JACKSONVILLE, FL 32223 City-St-Zip: JACKSONVILLE, FL 32223

Title: () Delete Title: (X) Change ( ) Addition

BAMBACUS, SHEILA Name: BEALL, KELLY Name:

11379 TACITO CR DR. S Address: Address: 11360 SHADY BROOK LANE City-St-Zip: JACKSONVILLE, FL 32223 City-St-Zip: JACKSONVILLE, FL 32223

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVE STRATHMANN **PSD** 03/13/2007