

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37109

FILED
Jan 13, 2009
Secretary of State

Entity Name: TARA WOODS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2600 TARA LAKES CIR.
NO. FORT MYERS, FL 33917

New Principal Place of Business:

Current Mailing Address:

2600 TARA LAKES CIR
NORTH FORT MYERS, FL 33917

New Mailing Address:

FEI Number: 57-2796502

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PUHHFUERST, FRED
2600 TARA LAKES CIRCLE
NORTH FORT MYERS, FL 33917 US

Name and Address of New Registered Agent:

PUHLFUERST, FRED
2600 TARA LAKES CIRCLE
NORTH FORT MYERS, FL 33917 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: FRED PUHLFUERST

01/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BRDA, LEE
Address: 19264 POTOMAC CIRCLE
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: D () Delete
Name: KATZ, MILTON
Address: 19675 WOODFIELD CIRCLE
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: M () Delete
Name: LOUD, EVELYN
Address: 2857 DARWIN ST
City-St-Zip: N. FORT MYERS, FL 33917

Title: T (X) Delete
Name: CONGDON, RAYMOND J.
Address: 19726 KARA CIRCLE
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: D () Delete
Name: HEIDMOUS, RON
Address: 19476 OMEGA RD
City-St-Zip: N. FORT MYERS, FL 33917

Title: P () Delete
Name: PUHLFUERST, FRED
Address: 2837 TARA LAKES CIRCLE
City-St-Zip: N. FORT MYERS, FL 33917

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: KATZ, MILTON
Address: 19675 WOODFIELD CIRCLE
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MILTON KATZ

T

01/13/2009

Electronic Signature of Signing Officer or Director

Date