

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jun 08, 2006 8:00 am
Secretary of State**

05-01-2006 90292 049 ****70.00

DOCUMENT # N51042

1. Entity Name
**TIERRA VERDE LANDMARK HOMEOWNERS
ASSOCIATION, INC.**



Principal Place of Business
**943 LANDMARK CIRCLE
SAINT PETERSBURG, FL 33715 US**

Mailing Address
**943 LANDMARK CIRCLE
SAINT PETERSBURG, FL 33715 US**



03232006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3746942

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**STOOP, GERARD
943 LANDMARK CIRCLE
TIERRA VERDE, FL 33715**

**DO NOT WRITE
IN THIS SPACE**

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]

(NOTE: Registered Agent signature required when re-stating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD STOOP, GERARD 943 LANDMARK CIRCLE TIERRA VERDE, FL 33715
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD RILEY, MIKE 915 LANDMARK CIRCLE TIERRA VERDE, FL 33715
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST RIDEOUT, PHYLLIS 960 LANDMARK CIRCLE TIERRA VERDE, FL 33715
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

[Signature]

GERARD J. STOOP

06/06/06

727 865 7598

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone