

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 11, 2006 8:00 am**  
**Secretary of State**

07-11-2006 90014 047 \*\*\*\*61.25

**DOCUMENT # N94000006157**

1. Entity Name  
**TARA PHASE II-B ASSOCIATION, INC.**



Principal Place of Business  
**7180 DREWAY BLUFF  
BRADENTON, FL 34203-8007**

Mailing Address  
**7282 55TH AVE. E.  
PMB 212  
BRADENTON, FL 34203-8002**

**40098104**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

07062006

Chg-NP

CR2E037 (4/06)

4. FEI Number  
**65-0583296**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**COOPER, MARK  
5903 SAYLERS CREEK CT.  
BRADENTON, FL 34203**

7. Name and Address of New Registered Agent

Name  
**DANIEL W. McFADDEN**

Street Address (P.O. Box Number is Not Acceptable)

**5902 SAYLERS CREEK CT**

City

**BRADENTON**

**FL**

Zip Code

**34203**

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 **DANIEL W. McFADDEN**

Signature, typed or printed name of registered agent and title if applicable.

*Daniel W. McFadden* **TREASURER** **6 JULY 2006**

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by September 6, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

Make check payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE **DVP** ☒ Delete  
NAME **COLOZZA, AL**  
STREET ADDRESS **7136 DREWRY'S BLUFF**  
CITY-ST-ZIP **BRADENTON, FL 34203**

TITLE **DB** ☒ Delete  
NAME **BURNS, SANDRA**  
STREET ADDRESS **7124 DREWRY'S BLUFF**  
CITY-ST-ZIP **BRADENTON, FL 34203**

TITLE **DT** ☒ Delete  
NAME **COOPER, MARK**  
STREET ADDRESS **5903 SAYLERS CREEK CT.**  
CITY-ST-ZIP **BRADENTON, FL 34203**

TITLE **DP** ☐ Delete  
NAME **BENSON, IRWIN**  
STREET ADDRESS **5811 WHITE OAK BAYOU T.**  
CITY-ST-ZIP **BRADENTON, FL 34203**

TITLE **D** ☐ Delete  
NAME **RHODES, DAVE**  
STREET ADDRESS **7152 DREWRY'S BLUFF "**  
CITY-ST-ZIP **BRADENTON, FL 34203**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **DVP** ☐ Change ☒ Addition  
NAME **GORDON NEAL**  
STREET ADDRESS **7168 DREWRY'S BLUFF**  
CITY-ST-ZIP **BRADENTON, FL 34203**

TITLE **DB** ☐ Change ☒ Addition  
NAME **MARIAN MEYER**  
STREET ADDRESS **5906 SAYLERS CREEK CT**  
CITY-ST-ZIP **BRADENTON, FL 34203**

TITLE **DT** ☐ Change ☒ Addition  
NAME **DANIEL W. McFADDEN**  
STREET ADDRESS **5902 SAYLERS CREEK CT**  
CITY-ST-ZIP **BRADENTON, FL 34203**

TITLE **D** ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **DP** ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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: DANIEL W. McFADDEN**  
*Daniel W. McFadden* **TREASURER**

**6 JULY 2006**

**941-727-0073**

Date

Daytime Phone #