

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000924

FILED  
Apr 04, 2008  
Secretary of State

**Entity Name:** TAMARIND CAY RECREATION ASSOCIATION, INC.

**Current Principal Place of Business:**

15751 SAN CARLOS BLVD. #8  
FT. MYERS, FL 33908

**New Principal Place of Business:**

**Current Mailing Address:**

15751 SAN CARLOS BLVD. #8  
FT. MYERS, FL 33908

**New Mailing Address:**

**FEI Number:** 65-0574262

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

D.G. SUITOR & ASSOCIATES, INC.  
15751 SAN CARLOS BLVD. #8  
FT. MYERS, FL 33908 US

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

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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: S ( ) Delete  
Name: KITTREDGE, WALTER  
Address: 15091 TAMARIND CAY #508  
City-St-Zip: FORT MYERS, FL 33908

Title: P ( ) Delete  
Name: PAYNE, BERT  
Address: 15049 TAMARIND CAY #1307  
City-St-Zip: FORT MYERS, FL 33908

Title: T ( ) Delete  
Name: LONG, BOB  
Address: 15042 TAMARIND CAY #508  
City-St-Zip: FT MYERS, FL 33908

Title: VP ( ) Delete  
Name: NORDSTROM, SUSETTE  
Address: 15030 TAMARIND CAY CT #302  
City-St-Zip: FORT MYERS, FL 33908

Title: D ( ) Delete  
Name: LEMLEY, THOMAS  
Address: PO BOX 591  
City-St-Zip: HUNDRED, WV 26575

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: T (X) Change ( ) Addition  
Name: FRENCH, EDWARD  
Address: 2301 AUTUMN DRIVE  
City-St-Zip: FT MYERS, FL 33908

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: C.R. MIDDLETON

MGR

04/04/2008

Electronic Signature of Signing Officer or Director

Date