SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

N95000001279 (7)

DOCUMENT #1. Corporation Name TUNG AREA RESIDENTS ASSOCIATION, INC.

Principal Place of Business Mailing Address 537 E. PARK AVE. 537 E. PARK AVE TALLAHASSEE FL 32301 TALLAHASSEE FL 32301 3. Date Incorporated or Qualified 3a. Date of Last Report 03/16/1995 None 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 599 Tung Hill Dr 599 Tung Hill Dr. Not Applicable \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Tall Tall Fo Trust Fund Contribution Added to Fees Zip 323/1 Country Country 8. This corporation has liability for intangible tax under s. 199.032 U.S. LEON 29 24 Florida Statutes Yes 🔀 No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Wester BERTOCH, CARL A Street Address (P.O. Box Number is Not Acceptable)
599 Tung Hill Dr. 537 E. PARK AVE. TALLAHASSEE FL 32301 63 City Tall 84 Zip Code 323/(85 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when rainstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 986 VICE President TATLE DELETE 1.1 TITLE Change Addition George Harvey 638 Tung Hill Dr. HARVEY, GEORGE NAME 1.2 NAME **CR2E037** 638 TUNG HILL DR. STREET ADDRESS 1.3 STREET ADDRESS TALLAHASSEE FL 32311 Tall, PL 32311 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 2.1 TITLE Change Addition COOKERLY, GLEN NAME 2.2 NAME 941 TUNG HILL DR. STREET ADORESS 2.3 STREET ADDRESS TALLAHASSEE FL 32311 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition MATLOCK, JOHN NAME 3.2 NAME 675 TUNG HILL DR. STREET ADDRESS 3.3 STREET ADDRESS TALLAHASSEE FL 32311 CITY-ST-ZIP 3.4. CITY - ST - ZIP TITLE Grearge Harvey DELETE 4.1 TITLE Change Addition 638 TONG Hitt Dr. NAME 4 2 NAME T-11. PC 323+(STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP Treasurer TITLE DELETE Addition 5.1 TITLE Change Tom Haxby NAME 5.2 NAME 466 Tung Hill Dr. STREET ADDRESS 5.3 STREET ADDRESS Tall. FL 32311 President Herbwester CITY-ST-ZIP 54 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Addition NAME 6 2 NAME 599 Tung Hill Dr STREET ADORESS 6.3 STREET ADDRESS Tall. FL 32311 CITY-ST-ZIP 6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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

SOMETURE AND TYPED OR PRINTED NAME OF GONING OFFICER OR DIRECTOR

that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.