2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003883

FILED Apr 26, 2012 Secretary of State

Entity Name: LAKE TARPON VILLAS CONDOMINIUM ASSOCIATION, INC.

FEI Number Applied For ()

Current Principal Place of Business:

New Principal Place of Business:

C/O QUALIFIED PROPERTY MGMT INC

5901 US HWY 19, SUITE 7Q US

QUALIFIED PROPERTY MANAGEMENT, INC.

5901 US HWY 19, SUITE 7Q NEW PORT RICHEY, FL 34652

NEW PORT RICHEY, FL 34652

Current Mailing Address:

New Mailing Address:

C/O QUALIFIED PROPERTY MGMT INC 5901 US HWY 19, SUITE 7Q

QUALIFIED PROPERTY MANAGEMENT, INC. 5901 US HWY 19, SUITE 7Q

NEW PORT RICHEY, FL 34652 US NEW PORT RICHEY, FL 34652 US

FEI Number: 59-3398834

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

QUALIFIED PROPERTY MANAGEMENT, INC.

QUALIFIED PROPERTY MANAGEMENT, INC.

5901 U.S. 19

5901 U.S. HWY 19 SUITE 7Q

SUITE 7Q NEW PORT RICHEY, FL 34652 US

NEW PORT RICHEY, FL 34652 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: MARY A. WHITE

04/26/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

PRES

RENQUIN, EARL Name:

5901 US HWY 19, STE 7Q Address:

City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title:

HEALY, BARBARA Name:

Address: 5901 US HWY 19, STE 7Q

City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: SEC

CARLSON, ANN Name:

Address: 5901 US HWY 19, STE 7Q

City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: TREA

Name: RENQUIN, LEONARD

Address: 5901 US HWY 19, STE 7Q

City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: DIR

RICH, DOMINIC Name:

5901 US HWY 19, STE 7Q Address: City-St-Zip: NEW PORT RICHEY, FL 34652 US

I hereby 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 all other like empowered.

PRES SIGNATURE: EARL RENQUIN 04/26/2012