2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005520

FILED Apr 21, 2008 Secretary of State

Entity Name: ARBOR GREENE OF NEW TAMPA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:				New Principal Place of Business:			
3434 COLWELL AVENUE BUITE 200 TAMPA, FL 33614				5844 OLD PASCO ROAD SUITE 100 WESLEY CHAPEL, FL 33544			
Current Mailing Address:				New Mailing Address:			
3434 COLWELL AVENUE BUITE 200 FAMPA, FL 33614				5844 OLD PASCO ROAD SUITE 100 WESLEY CHAPEL, FL 33544			
El Number:	59-3537771	FEI Number Applied For ()	FEI Nun	nber Not Appli	icable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:		Name and	Address of	f New Registered Agent:	
RIZZETTA & COMPANY INC. 3434 COLWELL AVE. SUITE 200 FAMPA, FL 33614 US The above named entity submits this statement for the purpose o n the State of Florida.				RIZZETTA & COMPANY INC. 5844 OLD PASCO ROAD SUITE 100 WESLEY CHAPEL, FL 33544 US of changing its registered office or registered agent, or both,			
SIGNATURE:				04/21/2008			
	Electron	c Signature of Registered Agent	t			Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Fitle: Name: Address: City-St-Zip:	P () HARTNAGEL, D 18153 HERON \ TAMPA, FL 336	VALK DRIVE		Title: Name: Address: City-St-Zip:		() Change () Addition	
Fitle: Name: Address: City-St-Zip:	TESH, LISA	Delete EENE HILL DRIVE 47		Title: Name: Address: City-St-Zip:		() Change () Addition	
Fitle: Name: Address: City-St-Zip:	S () CORCORAN, ST 10214 THICKET TAMPA, FL 336	POINTE DRIVE		Title: Name: Address: City-St-Zip:	NOAH, BELIN	PER POINTE DRIVE	
Fitle: Name: Nddress: City-St-Zip:	T () VETTER, ART 18030 ARBOR (TAMPA, FL 336			Title: Name: Address: City-St-Zip:		() Change () Addition	
Fitle: Name: Address: City-St-Zip:	YEALURU, PRA	R SOUND DRIVE		Title: Name: Address: City-St-Zip:	JACKSON, B	OR RUN DRIVE	
Fitle: Name: Address: City-St-Zip:	D () TANNENBAUM, 17910 TIMBER\ TAMPA, FL 336	IEW STREET		Title: Name: Address: City-St-Zip:	BRENNAN, N	LS LANDING AVENUE	
h b	:E	armatian cumplied with this filing	d		- 41	tion stated in Obsertan 440	

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: LISA TESH P 04/21/2008