

**2005 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**

**Feb 02, 2005 08:00 AM  
Secretary of State**

**DOCUMENT # N99000001048**

1. Entity Name  
**TARA OF PINELLAS HOMEOWNERS ASSOCIATION, INC.**



Principal Place of Business  
**8741 CAITLYN COURT  
SEMINOLE, FL 33772**

Mailing Address  
**8741 CAITLYN COURT  
SEMINOLE, FL 33772**



01272005 No Chg-NP CR2E037 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-3724079** Applied For  
Not Applicable  
5. Certificate of Status Desired ☐ **\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**TYLER, MICHAEL  
8741 CAITLYN COURT  
SEMINOLE, FL 33772**

**DO NOT WRITE  
IN THIS SPACE**

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 Michael Tyler MICHAEL TYLER PRESIDENT 1-27-05  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25  
Due by May 1, 2005**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TYLER, MICHAEL 8741 CAITLYN COURT SEMINOLE, FL 33772
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD ARNOLD, KIM 8796 CAITLYN CT. SEMINOLE, FL 33772
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ADKINSON, SONDR 8797 CAITLYN COURT SEMINOLE, FL 33772
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

1100000211651  
12/02/05-80128-008 \$1.25

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Michael Tyler MICHAEL TYLER PRESIDENT 1-27-05 (727) 392-5848  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #