

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008 8:00 am
Secretary of State

04-14-2008 90027 034 ****61.25

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1. Entity Name
TALA CAY HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
C/O SIGNATURE REALTY & MGT
4003 HARTLEY RD
JACKSONVILLE, FL 32257 US

Mailing Address
C/O SIGNATURE REALTY & MGT
4003 HARTLEY RD
JACKSONVILLE, FL 32257 US

2. Principal Place of Business - No P.O. Box #
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country



02052008 Chg-NP CR2E037 (12/06)

4. FEI Number
59-3574171

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
SIGNATURE REALTY & MGT
4003 HARTLEY RD
JACKSONVILLE, FL 32257

7. Name and Address of New Registered Agent
Name
SIGNATURE Realty & Mgt
Street Address (P.O. Box Number is Not Acceptable)
4003 HARTLEY RD
BRYAN CANTRELL (Broker)
City
JACKSONVILLE FL Zip Code
32257

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 *Bryan Cantrell* DATE 2/18/08
(NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2008

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ABOOD, MARK 9307 SAN JOSE BLVD JACKSONVILLE, FL 32257 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPCavallaro Angelo 2850 Casa Del Rio Terrace Jacksonville, FL 32257 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS SIMEK, WILLIAM 4018 CORRENTES CT E JACKSONVILLE, FL 32217 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP Keiser John 2826 Casa Del Rio Terrace Jacksonville FL 32257 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TDVP MOONEY, SANDRA 2827 CASA DEL RIO TERR. JACKSONVILLE, FL 32257 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT Dattres Michael 2859 Casa Del Rio Terrace Jacksonville FL 32257 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALLEN, LAMAR 2818 CASA DEL RIO TERRACE JACKSONVILLE, FL 32257 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Abbosh Tracy 2843 Casa Del Rio Terrace Jacksonville FL 32257 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ABBOSH, TRACY 3013 BEAUCLERE OAKS CT. JACKSONVILLE, FL 32257 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS Simek William 2819 Casa Del Rio Terrace Jacksonville FL 32257 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D. Margol Andrew 2865 Casa Del Rio Terrace Jacksonville FL 32257 ☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, and 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 an other like empowered.

SIGNATURE: *[Signature]* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE 2/15/08 Daytime Phone #