

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000091334

FILED
Apr 02, 2009
Secretary of State

Entity Name: TESUQUE RIVER ASSOCIATES, INC.

Current Principal Place of Business:

2300 HILLVIEW STREET
SARASOTA, FL 34239

New Principal Place of Business:

Current Mailing Address:

46 NORTH WASHINGTON BLVD.
#1
SARASOTA, FL 34239

New Mailing Address:

46 NORTH WASHINGTON BLVD.
#1
SARASOTA, FL 34236

FEI Number: 20-3100000

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LPS CORPORATE SERVICES, INC.
46 NORTH WASHINGTON BLVD.
#1
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: BARGER, PATTIE LEE
Address: 2300 HILLVIEW ST
City-St-Zip: SARASOTA, FL 34239

Title: DVS () Delete
Name: BARGER, STUART HOPKINS
Address: 2300 HILLVIEW ST
City-St-Zip: SARASOTA, FL 34239

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STUART BARGER

V

04/02/2009

Electronic Signature of Signing Officer or Director

_____ Date