## 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 719576** 

Entity Name: MAINLANDS OF TAMARAC BY THE GULF UNIT NO. 1

ASSOCIATION, INC.

**Current Principal Place of Business:** 

720 BROOKER CREEK BLVD.

SUITE 206

OLDSMAR, FL 34677

**Current Mailing Address:** 

720 BROOKER CREEK BLVD. SUITE 206

OLDSMAR, FL 34677 US

FEI Number: 59-1514233 Certificate of Status Desired: No.

Name and Address of Current Registered Agent:

SCANNAVINO, INC, 720 BROOKER CREEK BLVD. SUITE 206 OLDSMAR, FL 34677 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: DOMINICK SCANNAVINO 01/24/2014

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title Title VPD

JONES, PATRICK BARRY, JOHN Name Name

Address 720 BROOKER CREEK BLVD. Address 720 BROOKER CREEK BLVD. SUITE 206

SUITE 206

OLDSMAR FL 34677 OLDSMAR FL 34677 City-State-Zip: City-State-Zip:

Title Title

MULLER, DOROTHY WELSH, LLOYD Name Name

720 BROOKER CREEK BLVD. 720 BROOKER CREEK BLVD. Address Address

SUITE 206 SUITE 206

City-State-Zip: OLDSMAR FL 34677 City-State-Zip: OLDSMAR FL 34677

Title Ρ Title 2VPD

DUFFIELD, CLYDE MATTHEWS, BARRY Name Name

Address 720 BROOKER CREEK BLVD. Address 720 BROOKER CREEK BLVD.

> SUITE 206 SUITE 206

City-State-Zip: OLDSMAR FL 34677 City-State-Zip: OLDSMAR FL 34677

Title DIRECTOR Name BLAIS, JOAN

720 BROOKER CREEK BLVD. Address

SUITE 206

City-State-Zip: OLDSMAR FL 34677

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.

01/24/2014 SIGNATURE: CLYDE DUFFIELD PRESIDENT

**FILED** Jan 24, 2014

**Secretary of State** 

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