2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743974

Entity Name: TIGER POINT VILLAGE HOMEOWNERS ASSOCIATION, INC.

FILED Apr 25, 2014 Secretary of State CC5067301291

Current Principal Place of Business:

908 GARDENGATE CIRCLE PENSACOLA. FL 32504

Current Mailing Address:

908 GARDENGATE CIRCLE PENSACOLA, FL 32504

FEI Number: 59-2869746 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ETHERIDGE, KEVIN 908 GARDENGATE CIRCLE PENSACOLA, FL 32504 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title	PRESIDENT	Title	VICE-PRESIDENT
Name	COAD, ALLAN	Name	ABSHIRE, WANDA
Address	3474 TIBET DRIVE	Address	3927 W MADURA ROAD
City-State-Zip:	GULF BREEZE FL 32563	City-State-Zip:	GULF BREEZE FL 32563

DIRECTOR Title Title SECRETARY, TREASURER Name BRYANT, LARRY CALLOWAY, BRAD Name Address 3834 BANGKOK COVE Address 1320 CALCUTTA DRIVE GULF BREEZE FL 32563 City-State-Zip: City-State-Zip: GULF BREEZE FL 32563

Title DIRECTOR Title DIRECTOR

NameEARLY, CHERYLNameBECKWORTH, KEITHAddress3911 W MADURA ROADAddress1323 CALCUTTA DRIVECity-State-Zip:GULF BREEZE FL 32563City-State-Zip:GULF BREEZE FL 32563

TitleDIRECTORTitleDIRECTORNameWATSON, JACKNameGOODMAN, BILL

Address 3485 TIBET DRIVE Address 1329 CALCUTTA DRIVE

City-State-Zip: GULF BREEZE FL 32563 City-State-Zip: GULF BREEZE FL 32563

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.

SIGNATURE: ALLAN COAD PRESIDENT 04/25/2014