

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746882

Entity Name: TANNAHILL HOMEOWNER'S ASSOCIATION, INC.**Current Principal Place of Business:**2750 NORTHWEST 43RD STREET
SUITE 201
GAINESVILLE, FL 32606**Current Mailing Address:**PO BOX 357099
GAINESVILLE, FL 32635 US**FEI Number:** 59-3005311**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SCOTT DAVID KRUEGER CHARTERED
2750 NORTHWEST 43RD STREET
SUITE 201
GAINESVILLE, FL 32606 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:** SD KRUEGER**04/28/2025**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name HALL, WESLEY
Address 2223 NORTHWEST 102ND WAY
City-State-Zip: GAINESVILLE FL 32606

Title DIRECTOR
Name VYVERBERG, N
Address 2104 NORTHWEST 102ND WAY
City-State-Zip: GAINESVILLE FL 32606

Title DIRECTOR, TREASURER
Name KRUEGER, S D
Address 1833 NORTHWEST 102ND WAY
City-State-Zip: GAINESVILLE FL 32606

Title DIRECTOR
Name VAN STEENBURGH, T
Address 1923 NW 102 WAY
City-State-Zip: GAINESVILLE FL 32606

Title DIRECTOR
Name GORDON, J
Address 2123 NORTHWEST 102ND WAY
City-State-Zip: GAINESVILLE FL 32606

Title DIRECTOR
Name ZUKAS, L
Address 2023 NW 102ND WAY
City-State-Zip: GAINESVILLE FL 32606

Title DIRECTOR, PRESIDENT
Name BUCHHOLZ, B
Address 1924 NW 102ND WAY
City-State-Zip: GAINESVILLE FL 32606

Title DIRECTOR, VP
Name FOSTER, J
Address 1824 NORTHWEST 102ND WAY
City-State-Zip: GAINESVILLE FL 32606

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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: SCOTT DAVID KRUEGER**TREASURER****04/28/2025**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name CHANDRAN, TIMOTHY
Address 1813 NORTHWEST 102ND WAY
City-State-Zip: GAINESVILLE FL 32606

Title DIRECTOR
Name SCHULTE, D
Address 2224 NORTHWEST 102ND WAY
City-State-Zip: GAINESVILLE FL 32606

Title DIRECTOR
Name DESTEPHENS, J
Address 2134 NORTHWEST 102ND WAY
City-State-Zip: GAINESVILLE FL 32606