

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02693

Entity Name: TARPONAIRE MOBILE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**38791 US 19N
LOT 810
TARPON SPRINGS, FL 34689**Current Mailing Address:**38791 US 19N
LOT 810
TARPON SPRINGS, FL 34689 US**FEI Number: 59-2397142****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GYDE, GEORGE
38791 US 19N
LOT 810
TARPON SPRINGS, FL 34689 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 TREASURER
Name EGGLESTON, MICHAEL
Address 38791 US 19N
 LOT 708
City-State-Zip: TARPON SPRINGS FL 34689

Title S
Name IREY, MARILYN
Address 38791 US 19N
 LOT 234
City-State-Zip: TARPON SPRINGS FL 34689

Title D
Name BRAAKSMA, TIMOTHY
Address 38791 US 19N
 LOT 805
City-State-Zip: TARPON SPRINGS FL 34689

Title VP
Name BUTTERMAN, DOUGLAS JAY
Address 38791 US 19N
 LOT 706
City-State-Zip: TARPON SPRINGS FL 34689

Title P
Name GYDE, GEORGE
Address 38791 US 19N
 LOT 810
City-State-Zip: TARPON SPRINGS FL 34689

Title D
Name DUFFIELD, ROBERT
Address 38791 US 19N
 LOT 824
City-State-Zip: TARPON SPRINGS FL 34689

Title DIRECTOR
Name O'HARRA, JAMES
Address 38791 US 19N
 LOT 811
City-State-Zip: TARPON SPRINGS FL 34689

Title DIRECTOR
Name GASKINS, JAMES
Address 38791 19N
 LOT 936
City-State-Zip: TARPON SPRINGS FL 34689

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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: MICHAEL E. EGGLESTON**TREASURER****03/03/2017**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	WENDT, NANCY
Address	38791 US 19N LOT 220
City-State-Zip:	TARPON SPRINGS FL 34689