## 2025 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N18000008314

Entity Name: TARA WEST END HOMEOWNERS' ASSOCIATION, INC.

**FILED** Jun 13, 2025 Secretary of State 0873170205CC

## **Current Principal Place of Business:**

C/O CORNERSTONE MANAGEMENT SERVICES 106 N 33RD COURT SUITE A GAINESVILLE, FL 32607

## **Current Mailing Address:**

C/O CORNERSTONE MANAGEMENT SERVICES 106 N 33RD COURT SUITE A GAINESVILLE, FL 32607 US

FEI Number: 84-1906363 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CORNERSTONE MANAGEMENT SERVICES OF FL, LLC 106 NW 33RD COURT SUITE A GAINESVILLE, FL 32607 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: JAMES WILLIAMS 06/13/2025

Electronic Signature of Registered Agent

Officer/Director Detail:

Title PD Title VP. DIRECTOR

Name ELLIOT, AMY Name OLADERU, OLUWADAMILOLA

C/O CORNERSTONE MANAGEMENT C/O CORNERSTONE MANAGEMENT Address Address

**SERVICES SERVICES** 

106 N 33RD COURT SUITE A 106 N 33RD COURT SUITE A

GAINESVILLE FL 32607 GAINESVILLE FL 32607 City-State-Zip: City-State-Zip:

Title SECRETARY, TREASURER, Title REGISTERED AGENT

**DIRECTOR** 

WILLIAMS, JAMES Name Name MASTIN. SHERRI

Address C/O CORNERSTONE MANAGEMENT Address

C/O CORNERSTONE MANAGEMENT SERVICES **SERVICES** 

106 N 33RD COURT SUITE A 106 N 33RD COURT SUITE A

City-State-Zip: GAINESVILLE FL 32607 GAINESVILLE FL 32607 City-State-Zip:

Date

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.