2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#713888

Apr 07, 2006 Secretary of State

Entity Name: TARA ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 2641 E. ATLANTIC BLVD SUITE 310 POMPANO BEACH, FL 33062 **New Mailing Address: Current Mailing Address:** P.O. BOX 802 POMPANO BEACH, FL 33061 FEI Number: 59-1237569 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LIST, SIMONE 2121 NE 68TH ST., APT 106 FORT LAUDERDALE, FL 33308 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition LIST, SIMONE. LIST, SIMONE, Name: Name: 2121 NE 68TH ST., APT. #106 Address: 2121 NE 68TH ST., APT. #106 Address: City-St-Zip: FT LAUDERDALE, FL City-St-Zip: FT LAUDERDALE, FL Title: () Delete Title: PD (X) Change () Addition ANDRASI, JOSEPH Name: ANDRASI, JOSEPH Name: Address: 2121 NE 68TH ST., APT 208 Address: 2121 NE 68TH ST., APT 208 City-St-Zip: FORT LAUDERDALE, FL 33308 City-St-Zip: FORT LAUDERDALE, FL 33308 Title: () Delete Title: () Change () Addition ORTUBE, VANIA Name: Name: 2121 NE 68TH ST., APT 203 Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33308 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: ZURHEIDE, LOUISE Name: YURICK, HEIDI 2121 NE 68TH ST., APT 104 2121 NE 68TH ST., APT 103 Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33308 City-St-Zip: FORT LAUDERDALE, FL 33308 Title: () Delete Title: () Change (X) Addition ALBERSTADT, CAROL Name: Name: 2121 NE 68TH ST., APT 102 Address: Address: FORT LAUDERDALE, FL 33308 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: TERRY MCGREGOR MR 04/07/2006