


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90355 005 ****61.25

DOCUMENT # 724113 1. Entity Name TIERRA DEL SOL CONDOMINIUM, INC.					
Principal Place of Business 250 N E 20TH STREET ATTN: PRESIDENT BOCA RATON, FL 33431			Mailing Address C/O BEACON PROPERTY MGMT INC 500 N E SPANISH RIVER BLVD #18 BOCA RATON, FL 33431		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1578891	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
WILLIS, ERNEST W C/O BEACON PROPERTY MGMT INC 500 NE SPANISH RIVER BLVD #18 BOCA RATON, FL 33431				Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	SD	<input checked="" type="checkbox"/> Delete	TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MASCASAK, ELIZABETH		NAME	Daly, Harry	
STREET ADDRESS	250 NE 20 STREET #105-N		STREET ADDRESS	250 N.E. 20th St., Apt 119	
CITY-ST-ZIP	BOCA RATON, FL 33431		CITY-ST-ZIP	Boca Raton, FL 33431	
TITLE	VPD	<input checked="" type="checkbox"/> Delete	TITLE	VPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RIOS, WILLIAM 1ST		NAME	Joe Micelli - 1st	
STREET ADDRESS	250 NE 20TH ST, APT 125		STREET ADDRESS	250 N.E. 20th Street, #131	
CITY-ST-ZIP	BOCA RATON, FL 33431		CITY-ST-ZIP	Boca Raton, FL 33431	
TITLE	P/D	<input checked="" type="checkbox"/> Delete	TITLE	VPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DLUHOSH, JOHN		NAME	Ralph Meli - 2nd	
STREET ADDRESS	250 NE 20TH ST #506		STREET ADDRESS	2 EGERT LANE	
CITY-ST-ZIP	BOCA RATON, FL 33431		CITY-ST-ZIP	Westerly, RI 02891	
TITLE	T/D	<input checked="" type="checkbox"/> Delete	TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FORTIER, JEAN		NAME	Robert Formica	
STREET ADDRESS	250 NE 20 ST #206		STREET ADDRESS	278 NW 113th St	
CITY-ST-ZIP	BOCA RATON, FL 33431		CITY-ST-ZIP	Boca Raton, FL 33432	
TITLE	VPD	<input checked="" type="checkbox"/> Delete	TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DELL'ORSO, UMBERTO 2ND		NAME	Mabel Wimer	
STREET ADDRESS	250 N E 20TH STREET #129		STREET ADDRESS	250 N.E. 20th Street, #132	
CITY-ST-ZIP	BOCA RATON, FL 33431		CITY-ST-ZIP	Boca Raton, FL 33431	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Harry Daly Pres April 12 06 5613382107</i>					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
<small>Date Daytime Phone #</small>					

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01112006 Chg-NP CR2E037 (11/05)

4. FEI Number
59-1578891

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

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7. Name and Address of New Registered Agent

Name

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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NAME

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CITY-ST-ZIP

SD

MASCASAK, ELIZABETH

250 NE 20 STREET #105-N

BOCA RATON, FL 33431

VPD

RIOS, WILLIAM 1ST

250 NE 20TH ST, APT 125

BOCA RATON, FL 33431

P/D

DLUHOSH, JOHN

250 NE 20TH ST #506

BOCA RATON, FL 33431

T/D

FORTIER, JEAN

250 NE 20 ST #206

BOCA RATON, FL 33431

VPD

DELL'ORSO, UMBERTO 2ND

250 N E 20TH STREET #129

BOCA RATON, FL 33431

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SD

Mabel Wimer

250 N.E. 20th Street, #132

Boca Raton, FL 33431

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP