

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 03, 2004 8:00 am**  
**Secretary of State**

05-03-2004 91212 023 \*\*\*150.00

<b>DOCUMENT # 759711</b>	
1. Entity Name B.T.T. CONDOMINIUM ASSOCIATION, INC.	

Principal Place of Business 6610 NORTH UNIVERSITY DRIVE SUITE #120 TAMARAC, FL 33321	Mailing Address 6610 NORTH UNIVERSITY DRIVE SUITE #120 TAMARAC, FL 33321
---	---



04282004 No Chg-NP CR2E037 (10/03)

4. FEI Number 65-0220884	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

ZEIGER, SANDRA  
6610 N. UNIVERSITY DR.  
#120  
TAMARAC, FL 33321

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

<b>Filing Fee is \$61.25 Due by May 1, 2004</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
---	--	------------------------------------

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SINGH, MANNY 6610 N UNIVERSITY DR #220 TAMARAC, FL 33321
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ZEIGER, SANDRA 6610 N. UNIVERSITY DR., #120 TAMARAC, FL 33321
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZEIGER, TONEL 6610 N UNIVERSITY DR, #120 TAMARAC, FL 33321
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:** *Sandra Zeiger* 4/28/04 9547207807  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #