

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769760

FILED
Jan 26, 2005
Secretary of State

Entity Name: TEN-EIGHTY CONDOMINIUM, INC.

Current Principal Place of Business:

% VASSILIS, TSAGAS
37 BRACKETT ST.
BIRGHTON, MA 02135

New Principal Place of Business:

Current Mailing Address:

% VASSILIS, TSAGAS
37 BRACKETT ST.
BIRGHTON, MA 02135

New Mailing Address:

FEI Number: 59-2358344

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TSAGAS, VASSILIS
1080 92ND ST.
BAY HARBOR ISLANDS, FL 33154 US

Name and Address of New Registered Agent:

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:

Title: S () Delete
Name: GARCIA, ROBERT,
Address: 1086 92ND STREET
City-St-Zip: BAY HBR ISLANDS, FL

Title: TD () Delete
Name: ANTEQUERA, MARJORIE, F.
Address: 1082 92ND STREET
City-St-Zip: BAY HBR ISLANDS, FL

Title: PTD () Delete
Name: TSAGAS, VASSILIS,
Address: 1080 92ND STREET
City-St-Zip: BAY HBR ISLANDS, FL

Title: VD () Delete
Name: GARCIA, YOLANDA
Address: 1086 92ND STREET
City-St-Zip: BAY HARBOR ISLAND, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: TSAGAS, VASSILIS

PTD

01/26/2005

Electronic Signature of Signing Officer or Director

Date