## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000004248

Entity Name: TRIBECA CONDOMINIUM ASSOCIATION, INC.

FILED Mar 20, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

BEACHWAY PROPERTY MANAGEMENT 1500 MICHIGAN AVENUE PO BOX 398719 MIAMI BEACH, FL 33139

MIAMI BEACH, FL 33239

Current Mailing Address: New Mailing Address:

PO BOX 398719 C/O BEACHWAY PROPERTY MANAGEMENT

MIAMI BEACH, FL 33239 P.O. BOX 398718 MIAMI BEACH, FL 33239

FEI Number: 11-3644536 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:

TAPPAN, ROBERT

1400 14TH STREET

1234 14 ASH INDICAN AVENUE

1100 11TH STREET 1234 WASHINGTON AVENUE MIAMI, FL 33129 US #303

MIAMI BEACH, FL 33129 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: ROBERT TAPPAN 03/20/2008

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: P ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 DANGAR, COREY
 Name:
 DANGAR, COREY

 Address:
 1508 MICHIGAN AVE
 Address:
 1508 MICHIGAN AVE #4

 City-St-Zip:
 MIAMI BEACH, FL 33139
 City-St-Zip:
 MIAMI BEACH, FL 33139

Title: T ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 COLDEN, TRACY
 Name:

 Address:
 1501 VAN BUREN ST.
 Address:

 City-St-Zip:
 WASHINGTON, DC 20012
 City-St-Zip:

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad (\ ) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf S} \qquad ({\sf X}) \, {\sf Change} \, (\ ) \, {\sf Addition}$ 

 Name:
 HANNA, TAMARA
 Name:
 BURNS, AARON

 Address:
 1861 N. BISSELL
 Address:
 1057 15TH STREET # 24

 City-St-Zip:
 CHICAGO, IL 60614
 City-St-Zip:
 MIAMI BEACH, FL 33139

I hereby certify that the information supplied with this filing does not qualify 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: COREY DANGAR P 03/20/2008