

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003083

FILED
May 01, 2008
Secretary of State

Entity Name: THE TRI COMMUNITY HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

2531 NW 121 ST
MIAMI, FL 33167 US

New Principal Place of Business:

2190 NW 135TH STREET
MIAMI, FL 33167 US

Current Mailing Address:

P.O. BOX 681617
MIAMI, FL 33168

New Mailing Address:

P.O. BOX 681617
MIAMI, FL 33168 US

FEI Number: 65-0580890 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MARTIN, EUNICE L
1444 BISCAYNE BLVD, 220
MIAMI, FL 33132 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: DIR () Delete
Name: GILLARD, RUDEAN
Address: 2531 NW 121 ST
City-St-Zip: MIAMI, FL 33167

Title: VP () Delete
Name: SIMMS, A. L
Address: 13300 NW 21 AVENUE
City-St-Zip: MIAMI, FL 33167

Title: VP () Delete
Name: ROLLINS, DOROTHY
Address: 2200 NW 133 STREET
City-St-Zip: MIAMI, FL 33167

Title: SD () Delete
Name: SUTTON, PAULINE
Address: 2151 NW 133 STREET
City-St-Zip: MIAMI, FL 33167

Title: D () Delete
Name: MCDUFFIE, ROSA
Address: 2152 NW 133RD STREET
City-St-Zip: MIAMI, FL 33167

Title: DP (X) Delete
Name: DORETHA, NICHSON
Address: 2190 NW 135TH ST
City-St-Zip: MIAMI, FL 33167 14

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: NICHSON, DORETHA G
Address: 2190 NW 135TH STREEET
City-St-Zip: MIAMI, FL 33167 US

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

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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 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: DORETHA NICHSON

P/D

05/01/2008

Electronic Signature of Signing Officer or Director

_____ Date