2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2006
Secretary of State

DOCUMENT# N97000004620

Entity Name: TREASURE COVE UNIT OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

4495 TREASURE COVE DR
FT. LAUDERDALE, FL 33312 US

New Principal Place of Business:

Current Mailing Address:

2176 W OAKLAND PARK BLVD
FT. LAUDERDALE, FL 33311 US

New Mailing Address:

C/O ABSOLUTE PROPERTY MANAGEMENT
101 N. ST. RD. 7, #119
MARGATE, FL 33063 US

FEI Number: 65-0777754 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PRO PROPERTY MANAGEMENT
2176 W. OAKLAND PARK BLVD.
FORT LAUDERDALE, FL 33311 US

Name and Address of New Registered Agent:

ABSOLUTE PROPERTY MANAGEMENT
101 N. ST. RD. 7
119
MARGATE, FL 33063 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: ABSOLUTE PROPERTY MANAGEMENT 02/09/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: QUINN, PETER
Address: 4487 TREASURE COVE DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: VD ( ) Delete
Name: GUITAR, BILLY J
Address: 4493 TREASURE COVE DR
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: SD ( ) Delete
Name: WHITE, LYLE
Address: 4489 TREAURE COVE DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: TD ( ) Delete
Name: CANCANNON, ELISABETH
Address: 4495 TREASURE COVE DR
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: D ( ) Delete
Name: D'AMICO, JOE
Address: 4491 TREASURE COVE DR
City-St-Zip: FORT LAUDERDALE, FL 33312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change ( ) Addition
Name: D'AMICO, JOE
Address: 4491 TREASURE COVE DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33312

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

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

Title: D (X) Change ( ) Addition
Name: CHAFFEE, OWEN
Address: 2763 NW 45TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33312

I hereby certify that the information supplied with this filing does not qualify for the 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: ABSOLUTE PROPERTY MANAGEMENT PM 02/09/2006
Electronic Signature of Signing Officer or Director Date