2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004620

FILED Jaņ 15, 2<u>00</u>7 Secretary of State

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

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

4495 TREASURE COVE DR FT. LAUDERDALE, FL 33312 US

Current Mailing Address: New Mailing Address:

C/O ABSOLUTE PROPERTY MANAGEMENT C/O ABSOLUTE PROPERTY MANAGEMENT

101 N. ST. RD. 7, #119 541 S. ST. RD. 7, #12 MARGATE, FL 33063 US MARGATE, FL 33068

FEI Number: 65-0777754 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:

ABSOLUTE PROPERTY MANAGEMENT ABSOLUTE PROPERTY MANAGEMENT

101 N. ST. RD. 7 541 S. ST. RD. 7

119 MARGATE, FL 33063 US MARGATE, FL 33068 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 01/15/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

() Delete (X) Change () Addition QUINN, PETER CANCANNON, ELISABETH Name: Name: 4487 TREASURE COVE DRIVE Address: 4495 TREASURE COVE DR Address: City-St-Zip: FORT LAUDERDALE, FL 33312 City-St-Zip: FORT LAUDERDALE, FL 33312 US

Title: VD Title: () Delete () Change () Addition

D'AMICO, JOE Name: Name: Address: 4491 TREASURE COVE DRIVE Address: City-St-Zip: FORT LAUDERDALE, FL 33312 City-St-Zip:

Title: Title: SD (X) Change () Addition () Delete

WHITE, LYLE GRICE, JIM Name: Name:

4489 TREAURE COVE DRIVE 4489 TREAURE COVE DRIVE Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33312 City-St-Zip: FORT LAUDERDALE, FL 33312

() Delete Title: TD Title: TD (X) Change () Addition CANCANNON, ELISABETH HUSTON, LIZZETTE Name: Name: 4406 TREASURE COVE DRIVE Address: 4495 TREASURE COVE DR Address: FORT LAUDERDALE, FL 33312 FORT LAUDERDALE, FL 33312 US

Title: Title: (X) Change () Addition

() Delete CHAFFEE, OWEN IRIZARRY, JOSE Name: Name: 2763 NW 45TH STREET 2765 SW 45TH STREET Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33312 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.

City-St-Zip:

SIGNATURE: ABSOLUTE PROPERTY MANAGEMENT PM01/15/2007

Electronic Signature of Signing Officer or Director

Date