


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2007 8:00 am
Secretary of State

04-09-2007 90087 007 ****61.25

DOCUMENT # 712304	
1. Entity Name THE TUDOR CONDOMINIUM ASSOCIATION, INC.	

Principal Place of Business 332 ORANGE TREE DRIVE, STE 2 ATLANTIS, FL 33462	Mailing Address 332 ORANGE TREE DRIVE, STE 2 ATLANTIS, FL 33462
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40054720



2. Principal Place of Business - No P.O. Box # 332 Orange Tree Dr.	3. Mailing Address 332 Orange Tree Dr.
Suite, Apt. #, etc. # 1	Suite, Apt. #, etc. # 1

03282007 Chg-NP CR2E037 (12/06)

City & State Atlanta FL	City & State Atlanta FL
Zip 33462	Zip 33462
Country USA	Country USA

4. FEI Number NOT APPLICABLE	Applied For <input checked="" type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
MARGOLIS, JOHN A 9990 S.W. 77TH AVENUE, STE 330 MIAMI, FL 33156	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	Zip Code
FL	

8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering) DATE _____

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP KARASOFF, MARCIA 332 ORANGE TREE DRIVE, STE 2 ATLANTIS, FL 33462 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP BRUNO, KENNETH 332 ORANGE TREE DR SUITE 1 ATLANTIS, FL 33462 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS TOPPIN, CATHY 796 OAK HILL BARRINGTON, IL 60010 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT CLARKE, GEORGE 332 ORANGE TREE DRIVE, STE 4A ATLANTIS, FL 33462 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Bruno, Kenneth 332 Orange Tree Dr. # 1 Atlanta, FL 33462 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP Toppin, Cathy 796 Oak Hill Barrington, IL 60010 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS Guenard, Josephine 34 Aries Way Milford, MA 01757 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT Karasoff, Marcia 332 Orange Tree Dr. # 2 Atlanta FL 33462 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: Kenneth Bruno Kenneth Bruno, Pres 4.4.07 561-317-8783
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #