2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721751

FILED Apr 15, 2007 Secretary of State

Entity Name: TROPICAL TERRACE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
3725 NE N MIAMI, F	6TH AVE FL 33161		13725 NE (N MIAMI, F			
Current Mailing Address:			New Maili	New Mailing Address:		
3725 NE N MIAMI, F	6TH AVE FL 33161		13725 NE (N MIAMI, F			
El Number:	: 59-1725688	FEI Number Applied For ()	FEI Number Not Appl	icable () Certificate of Sta	tus Desired()	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
	. 6 AVE. IIAMI, FL 33161			SAVENUE AMI, FL 33161 US	nd agent or both	
The chave	namad antituc	ubmite thic etatomont for the r				
	e named entity s e of Florida.	ubmits this statement for the p	ourpose of changing i	is registered office or registere	a agent, or betti,	
	e of Florida. RE:	,		is registered office of registere		
n the State	e of Florida. RE:	ubmits this statement for the p c Signature of Registered Age		-	_	
n the State	e of Florida. RE:	c Signature of Registered Age	ent	04/15/20	07	
n the State	e of Florida. RE: Electroni S AND DIRECT	c Signature of Registered Age CORS: Delete ETH NUE	ent	04/15/200 Date	07 AND DIRECTOR	
n the State SIGNATUR DFFICER: ittle: lame: .ddress:	e of Florida. RE: Electroni S AND DIRECT D () CHALEF, KENNI 13725 NE 6 AVE MIAMI, FL 3316	c Signature of Registered Age ORS: Delete ETH NUE 1 Delete T NUE	ent ADDITION Title: Name: Address:	04/15/200 Date S/CHANGES TO OFFICERS	AND DIRECTOR	
n the State SIGNATUR DFFICERS ittle: lame: .ddress: itty-St-Zip: ittle: lame: .ddress:	e of Florida. RE: Electroni S AND DIRECT D () CHALEF, KENNE 13725 NE 6 AVE MIAMI, FL 3316 V () WORRIE, JULIE 13725 NE 6 AVE MIAMI, FL 3316	c Signature of Registered Age FORS: Delete ETH ENUE 1 Delete T ENUE 1 Delete 1 Delete 1	ent ADDITION Title: Name: Address: City-St-Zip: Title: Name: Address:	04/15/200 Date S/CHANGES TO OFFICERS () Change () Addition	AND DIRECTOR	

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: ALICIA J. COOK PD 04/15/2007