


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2006 8:00 am
Secretary of State

05-04-2006 90222 019 ****61.25

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|--|--|---|--|---|--|
| DOCUMENT # 723365 1. Entity Name TRACY CONDOMINIUM, INC | | | |  | |
| Principal Place of Business 3000 BIRD AVENUE NO 6 COCONUT GROVE, FL 33133 | | | Mailing Address 3000 BIRD AVENUE NO 6 COCONUT GROVE, FL 33133 | | |
| 2. Principal Place of Business | | 3. Mailing Address 40 BSSS-CONDO DEPT. Suite, Apt. #, etc. 2525 Ponce De Leon Blvd. City & State STA FLORIDA CORAL GABLES, FL | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | |
| City & State | | City & State | | | |
| Zip | Country | Zip | Country | 4. FEI Number 59-1580074 | |
| 33134 | USA | 33134 | USA | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent DEWOLFE, BRIAN 3000 BIRD AVENUE NO 6 COCONUT GROVE, FL 33133 | | | | 7. Name and Address of New Registered Agent Name JENNIFER GEER Street Address (P.O. Box Number is Not Acceptable) 3000 BIRD AVENUE, No. 1 City COCONUT GROVE FL Zip Code 33133 | |
| 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 <u>Jennifer Geer</u> Jennifer Geer 4/24/06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small> | | | | | |
| Filing Fee is \$61.25 Due by May 1, 2006 | | 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 | |
| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD DEWOLFE, BRIAN 3000 BRID AVENUE, #6 COCONUT GROVE, FL 33133 <input checked="" type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD JENNIFER GEER 3000 BIRD AVENUE, No. 1 COCONUT GROVE, FL 33133 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VD NAVASCUES, JOSE 3000 BIRD AVENUE, #9 COCONUT GROVE, FL 33133 <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | VD ROBERT CREWS 3000 BIRD AVENUE, No. 4 COCONUT GROVE, FL 33133 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD DRAPER, DONNA 3685 JUSTISON ROAD COCONUT GROVE, FL 33133 <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | D WESLEY VANLEER QUARLES 3000 BIRD AVENUE, No. 7 COCONUT GROVE, FL 33133 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | | 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"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
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| 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: <u>Jennifer Geer</u> Jennifer Geer 4/24/06 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone</small> | | | | | |