

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 20, 2007 8:00 am**  
**Secretary of State**

04-20-2007 90198 034 \*\*\*\*61.25

**DOCUMENT # 723365**

1. Entity Name  
**TRACY CONDOMINIUM, INC**



Principal Place of Business  
**3000 BIRD AVENUE  
NO 6  
COCONUT GROVE, FL 33133**

Mailing Address  
**C/O BSSS CONDO DEPT  
2525 PONCE DE LEON BLVD  
CORAL GABLES, FL 33134**

**50001391**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04132007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number  
**59-1580074**

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

~~GREER~~, JENNIFER **GEER**  
**3000 BIRD AVENUE  
NO 1  
COCONUT GROVE, FL 33133**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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 reinstalling)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☒ Delete  
NAME **GREER, JENNIFER**  
STREET ADDRESS **3000 BIRD AVE NO. 1**  
CITY-ST-ZIP **COCONUT GROVE, FL 33133**

TITLE **VD** ☒ Delete  
NAME **NAVASCUES, JOSE**  
STREET ADDRESS **3000 BIRD AVENUE, #9**  
CITY-ST-ZIP **COCONUT GROVE, FL 33133**

TITLE **TD** ☐ Delete  
NAME **DRAPER, DONNA**  
STREET ADDRESS **3685 JUSTISON ROAD**  
CITY-ST-ZIP **COCONUT GROVE, FL 33133**

TITLE **VD** ☐ Delete  
NAME **CREWS, ROBERT**  
STREET ADDRESS **3000 BIRD AVE NO. 4**  
CITY-ST-ZIP **COCONUT GROVE, FL 33133**

TITLE **D** ☐ Delete  
NAME **WESLEY, VANLEER Q**  
STREET ADDRESS **3000 BIRD AVE NO. 7**  
CITY-ST-ZIP **COCONUT GROVE, FL 33133**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☒ Change ☐ Addition  
NAME **GEER, JENNIFER**  
STREET ADDRESS **3000 BIRD AVE NO. 1**  
CITY-ST-ZIP **COCONUT GROVE, FL 33133**

TITLE **VD** ☒ Change ☐ Addition  
NAME **NAVASCUES, JOSE**  
STREET ADDRESS **8005 SW 89' COURT**  
CITY-ST-ZIP **MIAMI, FL 33173**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**D. Draper** **D. DRAPER**

**4-16-07**

**305-645-3153**