2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#727746

FILED Mar 26, 2009 Secretary of State

Entity Name: TEQUESTA TOWERS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
400 BEACH TEQUESTA	HROAD A, FL 33469					
Current Mailing Address:			New Mailir	New Mailing Address:		
PO BOX 35 TEQUESTA	516 A, FL 33469					
FEI Number:	59-1646206	FEI Number Applied For () FEI N	umber Not Appli	cable ()	Certificate of Status Desired ()	
Name and	Address of Co	urrent Registered Agent:	Name and	Address of N	ew Registered Agent:	
	HASSAN HROAD, APT 1 A, FL 33469	103 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:						
Electronic Signature of Registered Agent				Date		
OFFICERS AND DIRECTORS:			ADDITION	${\bf ADDITIONS/CHANGES\ TO\ OFFICERS\ AND\ DIRECTORS:}$		
Title: Name: Address: City-St-Zip:	P () I MARANGI, NICH 400 BEACH RD : TEQUESTA, FL	#701	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	VP () KELLER, JOHN 400 BEACH RD : TEQUESTA, FL		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	SD () HALL, HELEN 400 BEACH RD. TEQUESTA, FL		Title: Name: Address: City-St-Zip:	T (X) HALL, HELEN 400 BEACH RD. TEQUESTA, FL		
Title: Name: Address: City-St-Zip:	D () I CAVANAUGH, AN 400 BEACH RD : TEQUESTA, FL	#201	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	SD () UGEL, DALE 7212 HEATHERI BETHESDA, MD		

I hereby certify that the information supplied with this filing does not qualify 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: HELEN HALL T 03/26/2009