

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2005 8:00 am
Secretary of State

04-08-2005 90076 015 ****61.25

DOCUMENT # 729994

1. Entity Name
TIGERTAIL BAY CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**2715 TIGERTAIL AVE.
MIAMI, FL 33133**

Mailing Address
**GURANTEE MANAGEMENT SERVICES
7200 N.W. 7TH STREET SUITE 300
MIAMI, FL 33126-2941**

50034985



2. Principal Place of Business

3. Mailing Address

6225 NW 42 ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03142005 Chg-NP CR2E037 (10/03)

City & State

City & State
MIAMI, FL

4. FEI Number
59-1546097

Applied For
Not Applicable

Zip

Country

Zip

Country

33166 USA

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FEIN, P.A., STEVEN
900 SO. STATE RD.
PLANTATION, FL 33317**

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 reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
LIGERMAN, DAVID
2715 TIGERTAIL AVE., #403
MIAMI, FL 33133** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PRESIDENT
SHABATHAI, JOSEPH
2715 Tigertail Ave., #209
Miami, FL 33133** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
PORTER, ELISABETH
2715 TIGERTAIL AVE., #603
MIAMI, FL 33133** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V. PRESIDENT
TOTH, JOSEPH
2715 Tigertail Ave., #502
Miami, FL 33133** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
GRUBER, DONALD
2715 TIGERTAIL AVE. #602
MIAMI, FL 33133** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TREASURER
LOPEZ, GREG
2715 Tigertail Ave., #170
MIAMI, FL 33133** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SIERRA, ERNESTO
2715 TIGERTAIL AVE. #303
MIAMI, FL 33133** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DIRECTOR
DOLICO-DUNBAR, DEANA
2715 Tigertail Ave., #304
MIAMI, FL 33133** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
SHABATHAI, JOSEPH
2715 TIGERTAIL AVE. #209
MIAMI, FL 33133** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SECRETARY
LACKOWITZ, JEFFREY
2715 Tigertail Ave., #310
MIAMI, FL 33133** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 #

JOSEPH SHABATHAI 3-31-05

305-665-1907