

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733474

FILED
Jan 09, 2007
Secretary of State

Entity Name: T C P B CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2800 TENNIS CLUB DRIVE
WEST PALM BEACH, FL 334172846

New Principal Place of Business:

Current Mailing Address:

2800 TENNIS CLUB DRIVE
WEST PALM BEACH, FL 334172846

New Mailing Address:

FEI Number: 59-2165866

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIREKTOR, KENNETH
500 AUSTRALIAN AVENUE SO.
9TH FLOOR
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

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:

Title: DS () Delete
Name: ROHE, SYLVIA
Address: 2800 TENNIS CLUB DRIVE
City-St-Zip: WEST PALM BEACH, FL 33417

Title: DVP () Delete
Name: FELSHER, IRVING
Address: 2800 TENNIS CLUB DR.
City-St-Zip: WEST PALM BEACH, FL 33417

Title: DP () Delete
Name: FOGLEMAN, JEROME
Address: 2800 TENNIS CLUB DRIVE
City-St-Zip: WEST PALM BEACH, FL 33417

Title: DVP () Delete
Name: NEGIN, WILLIAM
Address: 2800 TENNIS CLUB DRIVE
City-St-Zip: WEST PALM BEACH, FL 33417

Title: DT () Delete
Name: FRIEDBERG, RALPH
Address: 2800 TENNIS CLUB DRIVE
City-St-Zip: WEST PALM BEACH, FL 33417

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JEROME FOGLEMAN

DP

01/09/2007

Electronic Signature of Signing Officer or Director

Date