


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

2/ 2

FILED
Apr 07, 2008 8:00 am
Secretary of State

02-15-2008 90016 042 ****61.25

DOCUMENT # 740205			
1. Entity Name 2800 TERRA MAR CONDOMINIUM ASSN., INC.			
Principal Place of Business 2800 TERRAMAR APT #9 FORT LAUDERDALE FL 33304 US		Mailing Address 14 SCARBOROUGH WINDHAM CT 06280-1031 US	
2. Principal Place of Business - No P.O. Box		3. Mailing Address	
State, Apt. #, etc. <i>Same</i>		State, Apt. #, etc. <i>Same</i>	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number NOT APPLICABLE		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DOYON, JACQUES 2800 TERRAMAR CONDOMINIUM TERRAMAR STREET APT 6 FORT LAUDERDALE FL 33304 <i>(DEAD)</i>		7. Name and Address of New Registered Agent Name: <i>CAMILLE RICHARD</i> Street Address: <i>2800 Terramar St Apt 9</i> <i>FT LAUDERDALE FL</i> FL <i>33304</i>	
8. The above named entity submits this statement for the purpose of changing its registered office, agent, or both, in the state of Florida. I further certify that I accept the obligations of registered agent.			
SIGNATURE <i>Camille Richard</i>		DATE	
FILE NOW: FEE IS \$61.25 Due By May 1, 2008		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	P RICHARD, CAMILLE 14 SCARBOROUGH WINDHAM CT 06280-1031 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<i>CAMILLE RICHARD</i> <i>2800 Terramar St Apt 9</i> <i>FT LAUDERDALE FL 33304</i> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	S BLOUIN, DENIS 20 JARDINS MERICI, APT 113 QUEBEC QC G1S 4-V4 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<i>DENIS BLOUIN</i> <i>2800 Terramar St Apt 10</i> <i>FT LAUDERDALE FL 33304</i> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	T DOYON, JACQUES 1814 10E RUE OUEST ST-COME QC G0M 1-J0 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<i>PASC. Hamon (DEAD)</i> <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
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
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 empowerments.			
SIGNATURE <i>Camille Richard P.</i>		DATE <i>2-8-08</i>	
SIGNATURE AND TYPED OR PRINTED NAME OF BOILING OFFICER OR DIRECTOR		DATE	

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1st MOORE CR2E037 (10/07)