

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2007 8:00 am
Secretary of State

04-05-2007 90144 015 ****61.25

DOCUMENT # 746007

1. Entity Name
TEQUESTA HILLS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**3900 COUNTY LINE RD.
TEQUESTA, FL 33469 US**

Mailing Address
**% ASSOCIATION MGRS INC
PO BOX 4586
TEQUESTA, FL 33469 US**

40051186



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

3. Mailing Address

P.O. Box 3603

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03272007 Chg-NP CR2E037 (12/06)

City & State

City & State
Tequesta, Florida

4. FEI Number
59-2125745

Applied For
Not Applicable

Zip

Country

Zip

Country

33469

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

**PETERSON, ERIC G
154 SIMS CREEK LANE
JUPITER, FL 33458**

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, 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
MCKERNAN, ANITA
3900 COUNTY LINE RD
TEQUESTA, FL 33469**

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DT Susan Knapp
3900 County Line Rd.
Tequesta, FL 33469**

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DS
WEIDMAN, LYNN
3900 COUNTYLINE RD
TEQUESTA, FL 33469**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP Susan Knapp
3900 County Line Rd.**

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DT
MACDONALD, MADELINE
3900 COUNTY LINE RD
TEQUESTA, FL 33469**

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DS Dayna Clarke
3900 County Line Rd.
Tequesta, FL 33469**

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
MCKEVNAN, ANITA
3900 COUNTY LINE RD
TEQUESTA, FL 33469**

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D Adrian Brion
3900 County Line Rd.
Tequesta, FL 33469**

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
STALLONE, COLETTE
3900 COUNTY LINE RD
TEQUESTA, FL 33469**

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ 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 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 an other like empowered:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Eric G Peterson 30 Mar 2007

0611075-6040