2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#750603

FILED Jan 31, 2007 Secretary of State

Entity Name: TOWN AND COUNTRY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 1431 S 14 AVE HOLLYWOOD, FL 33020 US **Current Mailing Address: New Mailing Address:** 1431 S 14 AVE HOLLYWOOD, FL 33020 US FEI Number: 59-2301254 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HVALSMARKEN, LARS HVALSMARKEN, LARS PRESIDE 1431 S. 14 AVE. 1431 S. 14 AVE. **APT 109** APT 109 HOLLYQOOD, FL 33020 US HOLLYQOOD, FL 33020 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: LARS HVALSMARKEN 01/31/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition DAVIS, ELLEN Name: Name: 1431 S 14 AVE APT 103 Address: Address: City-St-Zip: HOLLYWOOD, FL 33020 City-St-Zip: Title: Title: () Delete (X) Change () Addition SMITH, GARY W Name: ARCONA, LOIS Name: Address: 1358 POLK ST Address: 1431 S. 14 AVE., APT 102 City-St-Zip: HOLLYWOOD, FL 33020 City-St-Zip: HOLLYWOOD, FL 33020 Title: () Delete Title: () Change () Addition BALBUZA, JOYCE Name: Name: Address: 25 NE 210 STREET Address: City-St-Zip: MIAMI, FL 33179 City-St-Zip: () Change (X) Addition Title: () Delete Title: Name: Name: OZDOBA, STEHLI Address: Address: 1431 S. 14 AVE., APT 116 City-St-Zip: City-St-Zip: HOLLYWOOD, FL 33020 Title: () Delete Title: () Change (X) Addition GADOL, DEBRAH Name: Name: 1431 S. 14 AVE., APT 212 Address: Address: City-St-Zip: City-St-Zip: HOLLYWOOD, FL 33020 Title: () Delete Title: () Change (X) Addition CVETANOVIC, MIRJANA Name: Name: Address: Address: 1431 S. 14 AVE., APT 106 HOLLYWOOD, FL 33020 City-St-Zip: 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: LARS HVALSMARKEN PRES 01/31/2007