2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT #751646

1. Entity Name
TREASURE ISLAND COVE CONDOMINIUM



FILED Feb 05, 2007 8:00 am Secretary of State 02-05-2007 90110 009 ****61.25

ASSOCIATION, INC.								
	e of Business ASURE DRIVE GE, FL 33141	CU9	01 E TREASURE DRIVE		.	NITIO TINI DIGITE CIN	I BUBU BUBU BUBU BUBU BUBU BU	SII SISHIU DI URI
2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address	Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01192007 C	hg-NP	CR2E037 (12/0	06)
City & State		City & State			4. FEI Number 65-00004	16		Applied For Not Applicable
Zip	Country	Zip	Country		5. Certificate of Status Desired \$8.75 Additional Fee Required			
	6. Name and Address of Current	Registered Agent			7. Name and Add	iress of New R	Registered Agent	
DEDGIN TIM				Name				
BERGIN, TIM 1639 NORTH TREASURE DRIVE NORTH BAY VILLAGE, FL 33141				Street Address (P.O. Box Number is Not Acceptable)				
			Ci	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								
·g · · · · · · · · · · · · · · · ·			ampaign Finan Contribution.	cing	\$5.00 May Be Added to Fees	1	lake check payat rida Department	
10.	OFFICERS AND DI	RECTORS	11.		ADDITIONS/CHANG	ES TO OFFICE	RS AND DIRECTOR	
TITLE NAME	P STEVENAZZI, MARISA	Delete	TITLE NAME	V.P ARV	'. Eld, IOSE , 7 Nokoh Ty	Å NSMEUN Æ	☐ Cha	nge Addition
STREET ADDRESS CITY-ST-ZIP	NORTH BAY VILLAGE, FL	= /F	STREET ADI		TH BAY VILL		33141	
TITLE	VP	☐ Delete	TITLE	T, 5	5		Cha	nge 🔲 Addition
NAME OVEREY ADDRESS	BERGIN, TIM	-	NAME	REG	CIA. TIM		- VI	
STREET ADDRESS CITY-ST-ZIP			STREET ADI	HESS 1634	A NORTH TRE	msure of	7106	
	T				10 PAC 1131	CLAGE T		
TITLE NAME	MENDEZ, MILAGROS	☐ Delete	: TITLE NAME	P	w/Ac-3	dian e	Cha	nge Addition
STREET ADDRESS	1629 NORTH TREASURE DRIV	<u> </u>	STREET ADI	RESS 16-2	WDEZ, MILA A NORTH TY	TONGIME	DRIVÉ	
CITY-ST-ZIP	NORTH BAY VILLAGE, FL 3314		CITY-ST-Z		LTH BAY VIL		FL 33145	
TITLE NAME	S RAFE, RENE	Delete	TITLE NAME	1,427		, , , , , , , , , , , , , , , , , , ,	☐ Cha	nge
STREET ADDRESS	7861 SW 152ND AVE #2	, .	STREET ADS	nress				
CITY-ST-ZIP	MIAMI, FL 33193		CITY-ST-Z					
TITLE		☐ Delete	TITLE				☐ Cha	nge
NAME		_ 3	NAME					
STREET ADDRESS CITY-ST-ZIP			STREET ADI					
TITLE		☐ Delete	TITLE				☐ Cha	nge 🔲 Addition
NAME		_ 55.00	NAME					
STREET ADDRESS			STREET ADD	DRESS				
CITY-ST-ZIP			CITY-ST-ZI	Р				
12. Thereby o	certify that the information supplied with	this filing does not qualify f	or the exempti	ons contained	in Chapter 119, Flo	rida Statutes. I	further certify that t	he 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