

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755993

FILED
Apr 09, 2006
Secretary of State

Entity Name: 7 EAST CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

535 NE 7 AVENUE
FT. LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

535 NE 7 AVENUE
FT. LAUDERDALE, FL 33301

New Mailing Address:

FEI Number: 59-2478232 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TIGHE, TOM
800 E BROWARD BLVD
STE 505
FT LAUDERDALE, FL 33301 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: PD () Delete
Name: FEJES, FRED
Address: 543 NE 7TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: TD () Delete
Name: LAPON, STAN
Address: 547 NE 7TH AVE
City-St-Zip: FT LAUDERDALE, FL 33301

Title: VPD () Delete
Name: SALCEDO, MICHELE
Address: 567 NE 7TH AVE
City-St-Zip: FT LAUDERDALE, FL 33301

Title: D () Delete
Name: MICHELENA, WENDY
Address: 551 N.E. 7 AVE.
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: D () Delete
Name: OLDAKER, ALFRED
Address: PO BOX 11402
City-St-Zip: FORT LAUDERDALE, FL 33339

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPD (X) Change () Addition
Name: SALCEDO, MICHELE
Address: 567 NE 7TH AVE
City-St-Zip: FT LAUDERDALE, FL 33301

Title: SC (X) Change () Addition
Name: MICHELNA, WENDY
Address: 551 NE 7TH AVE
City-St-Zip: FT LAUDERDALE, FL 33301

Title: TR (X) Change () Addition
Name: OLDAKER, ALFRED
Address: PO BOX 11402
City-St-Zip: FORT LAUDERDALE, FL 33339

Title: D (X) Change () Addition
Name: GOLDMAN, DAVID
Address: 599 NE 7TH AVE
City-St-Zip: FORT LAUDERDALE, FL 3301

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: FRED FEJES

PD

04/09/2006

Electronic Signature of Signing Officer or Director

_____ Date