

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761356

FILED
Aug 06, 2007
Secretary of State

Entity Name: THREE RIVERS EAST CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1810 EAST OAKLAND PARK BLVD.
OAKLAND PARK, FL 33306

New Principal Place of Business:

Current Mailing Address:

1810 EAST OAKLAND PARK BLVD.
OAKLAND PARK, FL 33306

New Mailing Address:

FEI Number: 59-2217228 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

COCHRAN, JANET
1810 EAST OAKLAND PARK BLVD.
FT. LAUDERDALE, FL 33306 US

Name and Address of New Registered Agent:

COCHRANE, JANET
1810 EAST OAKLAND PARK BLVD.
FT. LAUDERDALE, FL 33306 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: JANET T COCHRANE

08/06/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: COCHRANE, JANET
Address: 1810 EAST OAKLAND PARK BLVD.
City-St-Zip: OAKLAND PARK, FL 33306

Title: VP () Delete
Name: MEAD, HOWARD
Address: 1810 E OAKLAND BLVD
City-St-Zip: FORT LAUDERDALE, FL 33306

Title: SD () Delete
Name: SANDERS, GWEN
Address: 1810 E OAKLAND OK BLVD
City-St-Zip: OAKLAND PARK, FL 33306

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: JANET T COCHRANE

PRES

08/06/2007

Electronic Signature of Signing Officer or Director

Date