

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766533

FILED
Feb 23, 2006
Secretary of State

Entity Name: TAMARA GARDENS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1940 TAMARA TRAIL
VERO BEACH, FL 32966 US

New Principal Place of Business:

Current Mailing Address:

1940 TAMARA TRAIL
VERO BEACH, FL 32966 US

New Mailing Address:

FEI Number: 59-2225357

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CIANCI, PAUL
1934 TAMARA TRAIL, III-C
VERO BEACH, FL 32966 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: CIANCI, PAUL
Address: 1934 TAMARA TRAIL, II-C
City-St-Zip: VERO BEACH, FL 32966

Title: SD () Delete
Name: WATSON, GAYLE C
Address: 1949 TAMARA TRAIL
City-St-Zip: VERO BEACH, FL 32966

Title: D () Delete
Name: HENNESSY, BOB
Address: 1933 TAMARA TRAIL
City-St-Zip: VERO BEACH, FL 32966

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP/T (X) Change () Addition
Name: WATSON, GAYLE C
Address: 1949 TAMARA TRAIL
City-St-Zip: VERO BEACH, FL 32966

Title: DIR (X) Change () Addition
Name: HENNESSY, BOB
Address: 1933 TAMARA TRAIL
City-St-Zip: VERO BEACH, FL 32966

Title: SEC () Change (X) Addition
Name: MONTERO, BILL
Address: 1485 79TH AVENUE
City-St-Zip: VERO BEACH, FL 32966 US

Title: MEM () Change (X) Addition
Name: LITWINIEC, GAYLIA
Address: 1945 TAMARA TRAIL
City-St-Zip: VERO BEACH, FL 32966 US

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: GAYLE WATSON

VP

02/23/2006

Electronic Signature of Signing Officer or Director

Date