## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **FILED C** Xan 22,92007 08:00 AM Secretary of State **DOCUMENT #769760** 1. Entity Name TEN-EIGHTY CONDOMINIUM, INC. Mailing Address Principal Place of Business % VASSILIS, TSAGAS % VASSILIS, TSAGAS 37 BRACKETT ST. 37 BRACKETT ST. BRIGHTON, MA 02135 BRIGHTON, MA 02135 01042007 No Chg-NP CR2E037 (4/06) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2358344 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent TSAGAS, VASSILIS DO NOT WRITE 1080 92ND ST. BAY HARBOR ISLANDS, FL 33154 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent alignature required when reinstating) 9. Election Campaign Financing Filing Fee Is \$61.25 \$5.00 May Be Trust Fund Contribution Due by May 1, 2007 Added to Fees 10. OFFICERS AND DIRECTORS NAME GARCIA, ROBERT STREET ADDRESS 1086 92ND STREET CITY - ST- ZIP BAY HBR ISLANDS, FL TIÈLE ANTEQUERA, MARJORIE F. STREET ADDRESS **1082 92ND STREET** 000000595088 01/23/07-80025-019 61.25 CITY-ST-ZIP BAY HBR ISLANDS, FL NAME TSAGAS, VASSILIS STREET ADDRESS 1080 92ND STREET DO NOT WRITE CITY-ST-ZIP BAY HBR ISLANDS, FL TITLE IN THIS SPACE NAME GARCIA, YOLANDA STREET ADDRESS **1086 92ND STREET** CHTY-ST-ZIP BAY HARBOR ISLAND, FL NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

CITY-ST-ZIP