

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000034

FILED
Jan 08, 2007
Secretary of State

Entity Name: THSW-7 CONDO ASOC., INC.

Current Principal Place of Business:

12945 SE SUZANNE DRIVE
OFFICE
HOBE SOUND, FL 33455 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 8106
HOBE SOUND, FL 33475 US

New Mailing Address:

FEI Number: 27-0076712

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOROSKY, RICK
12945 SE SUZANNE DRIVE
OFFICE
HOBE SOUND, FL 33455 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: P () Delete
Name: LETENDRE, DENNIS C
Address: 12953 SE SUZANNE DRIVE
City-St-Zip: HOBE SOUND, FL 33455 US

Title: VP () Delete
Name: PAINTER, BRETT
Address: 12953 SE SUZANNE DRIVE
City-St-Zip: HOBE SOUND, FL 33455 US

Title: SEC () Delete
Name: BOROSKY, RICK
Address: 12945 SE SUZANNE DRIVE
City-St-Zip: HOBE SOUND, FL 33455 US

Title: TREA () Delete
Name: BOROSKY, RICK
Address: 12945 SE SUZANNE DRIVE
City-St-Zip: HOBE SOUND, FL 33455 US

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:

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

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: DENNIS LETENDRE

P

01/08/2007

Electronic Signature of Signing Officer or Director

Date