2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N04000005611

₹I FILED Jun 23, 2008 Secretary of State

Entity Name: TRIESTE AT BOCA RATON MASTER ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

5300 W ATLANTIC AVE SUITE 300 1215 EAST HILLSBORO BOULEVARD DELRAY BEACH, FL 33484 DEERFIELD BEACH, FL 33441

Current Mailing Address: New Mailing Address:

1215 E HILLSBORO BLVD DEERFIELD BEACH, FL 33441

FEI Number: 20-2524210 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JEFFREY R. MARGOLIS, P.A.

C/O DUANE MORRIS LLP

200 SOUTH BISCAYNE BLVD., SUITE 3400

MIAMI, FL 33131 US

CAMPBELL PROPERTY MANAGEMENT
1215 EAST HILLSBORO BLVD
DEERFIELD, FL 33441 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: BRIAN TIGHT 06/23/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: ROSENTHORB, MILES Name: ROSENTHAL, MILES

 Name:
 ROSENTHORB, MILES
 Name:
 ROSENTHAL, MILES

 Address:
 5550 NE TRIESTE TERR
 Address:
 5550 NE TRIESTE TERR

 City-St-Zip:
 BOCA RATON, FL 33487
 City-St-Zip:
 BOCA RATON, FL 33487

Title: D () Delete Title: () Change () Addition

 Name:
 CZARNECKI, GERALD
 Name:

 Address:
 636 NE FRANCESCA LANE
 Address:

 City-St-Zip:
 BOCA RATON, FL 33487
 City-St-Zip:

Title: T () Delete Title: () Change () Addition

 Name:
 BROWN, MARTIN
 Name:

 Address:
 5540 NE TRIESTE TERR
 Address:

 City-St-Zip:
 BOCA RATON, FL 33487
 City-St-Zip:

Title: SD () Delete Title: () Change () Addition

 Name:
 NELSON, RAMONA
 Name:

 Address:
 613 NE FRANCESCA LANE
 Address:

 City-St-Zip:
 BOCA RATON, FL 33487
 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: BRIAN TIGHT PM 06/23/2008