

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 APR -7 AM 9:24

DOCUMENT # N04000006459 1. Entity Name TRANQUILITY CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 3300 PGA BOULEVARD SUITE 330 PALM BEACH GARDENS, FL 33410 US			Mailing Address 3300 PGA BOULEVARD SUITE 330 PALM BEACH GARDENS, FL 33410 US		
2. Principal Place of Business - No P.O. Box # 10 Phoenix Management Suite, Apt. #, etc. 3082 Jog Road City & State Lake Worth FL Zip 33467 Country USA		3. Mailing Address 10 Phoenix Management Suite, Apt. #, etc. 3082 Jog Road City & State Lake Worth FL Zip 33467 Country USA		03272008 Chg-NP CR2E037 (12/06)	
4. FEI Number 20-3533445		Applied For Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent ALLISON, DONALD M 1515 S. FEDERAL HWY. SUITE 306 BOCA RATON, FL 33432			7. Name and Address of New Registered Agent Name Rosenthal, David J Street Address (P.O. Box Number is Not Acceptable) Phoenix Management 3082 Jog Road City Lake Worth FL Zip Code 33467		
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		DATE 4/1/08			
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)		DATE			
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MASTROIANNI, NICHOLAS A II 3300 PGA BLVD., STE. 330 PALM BEACH GARDENS, FL 33410	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 400123858254 04/17/08--01014--011 **\$61.25	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P COHEN, STEPHEN 351 N CONGRESS AVE #142 BOYNTON BEACH, FL 33426	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PAVLIK, CHERI 3300 PGA BLVD, SUITE 330 PALM BEACH GARDENS, FL 33410	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Bergin, Jack 12703 SE OLD Cypress Dr Lake Sound, FL 33455	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition Bz 4/8/08	
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.					
SIGNATURE					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date 4/1/08 Daytime Phone #					