

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Feb 23, 2009
Secretary of State

DOCUMENT# N04000008586

Entity Name: TIERRA VERDE AT DELRAY BEACH CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**2000 ALTA MEADOWS LANE
DELRAY BEACH, FL 33444 US**New Principal Place of Business:****Current Mailing Address:**2000 ALTA MEADOWS LANE
PRESIDENT
DELRAY BEACH, FL 33444 US**New Mailing Address:****FEI Number:** 20-1179651 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**KATZMAN GARFINKEL, P.A.
1501 N.W. 49TH ST.
SUITE 202
FT. LAUDERDALE, FL 33309 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:** VD () Delete
Name: KIRSON, VICTOR
Address: 2050 ALTA MEADOWS LANE, APT. 2110
City-St-Zip: DELRAY BEACH, FL 33444**Title:** D () Delete
Name: STEFOFF, JOHN
Address: 2038 ALTA MEADOWS LANE, APT. 1510
City-St-Zip: DELRAY BEACH, FL 33444**Title:** P () Delete
Name: HRYNIEWICKI, GLENN A
Address: 2024 ALTA MEADOWS LANE, APT. 801
City-St-Zip: DELRAY BEACH, FL 33444**Title:** S () Delete
Name: JOHANCSEK, BRIAN
Address: 2040 ALTA MEADOWS LANE, APT. 1608
City-St-Zip: DELRAY BEACH, FL 33444**Title:** T () Delete
Name: LINNUS, LINDA
Address: 2010 ALTA MEADOWS LANE, APT. 204
City-St-Zip: DELRAY BEACH, FL 33444**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** P (X) Change () Addition
Name: KIRSON, VICTOR
Address: 2050 ALTA MEADOWS LANE, APT. 2110
City-St-Zip: DELRAY BEACH, FL 33444**Title:** VD (X) Change () Addition
Name: STEFOFF, JOHN
Address: 2038 ALTA MEADOWS LANE, APT. 1510
City-St-Zip: DELRAY BEACH, FL 33444**Title:** D (X) Change () Addition
Name: HRYNIEWICKI, GLENN A
Address: 2024 ALTA MEADOWS LANE, APT. 801
City-St-Zip: DELRAY BEACH, FL 33444**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 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: VICTOR KIRSON

P

02/23/2009

Electronic Signature of Signing Officer or Director

Date