

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003499

FILED  
Feb 19, 2009  
Secretary of State

**Entity Name:** TUDOR MANOR CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1125 NE 16TH PLACE  
FT LAUDERDALE, FL 33305

**New Principal Place of Business:**

**Current Mailing Address:**

1125 NE 16TH PLACE  
FT LAUDERDALE, FL 33305

**New Mailing Address:**

**FEI Number:** 41-2202414

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MELAND RUSSIN & BUDWICK, P.A.  
200 S BISCAYNE BLVD  
STE 3000  
MIAMI, FL 33131 US

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

MELAND RUSSIN & BUDWICK PA  
200 S BISCAYNE BLVD  
STE 3000  
MIAMI, FL 33131 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: MARK S. MELAND

02/19/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete  
Name: THOMSON, STEVEN  
Address: 2321 NW 30TH CT  
City-St-Zip: OAKLAND PARK, FL 33311

Title: D ( ) Delete  
Name: LAING-THOMSON, TARA  
Address: 2321 NW 30TH CT  
City-St-Zip: OAKLAND PARK, FL 33311

Title: VSD ( ) Delete  
Name: BROOMFIELD, ANDREW  
Address: 2321 NW 30TH CT  
City-St-Zip: OAKLAND PARK, FL 33311

**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:

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: MARK S. MELAND

RA

02/19/2009

Electronic Signature of Signing Officer or Director

Date