2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06469

FILED Jan 27, 2006 Secretary of State

Entity Name: TARA GARDENS MASTER CONDOMINIUM ASSOCIATION, INC.

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

C/O SIMON CAYOUETTE 10001 WEST ATLANTIC BLVD., #120

CORAL SPRINGS, FL 33071

Current Mailing Address:

C/O SIMON CAYOUETTE 10001 WEST ATLANTIC BLVD., #120

CORAL SPRINGS, FL 33071

FEI Number: 22-2409278

FEI Number Applied For ()

FEI Number Not Applicable ()

OFFICE

OFFICE

Certificate of Status Desired ()

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

CAYOUETTE, SIMON 521 N. RIVERSIDE DR., #309

POMPANO BEACH, FL 33062

2 US

DUHAIME, CHRISTIAN 1625 SE 17TH STREET CAUSEWAY FORT LAUDERDALE, FL 33316 US

10001 WEST ATLANTIC BLVD.,

CORAL SPRINGS, FL 33071

10001 WEST ATLANTIC BLVD.

CORAL SPRINGS, FL 33071

New Mailing Address:

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: CHRISTIAN DUHAIME

01/27/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

 Title:
 PD () Delete

 Name:
 SAMBAULT, JEAN-LUC

 Address:
 318 SAINT JEAN BAPTISTE

City-St-Zip: VILLE MERCIER P.Q., CA J6R 286

Title: VD () Delete
Name: LEBAEU, FRANCOIS
Address: 453 RUE JACOB NICOL

City-St-Zip: SHERBROOKE P.Q., CA J1J 4E5

Title: TD () Delete
Name: VALLERAND, GUYLAINE

Address: 318 SAINT JEAN BAPTISTE
City-St-Zip: VILLE MERCIER P.Q., CA J6R 286

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD (X) Change () Addition

Name: DUHAIME, MADELEINE

Address: 1625 SE 17TH STREET CAUSEWAY City-St-Zip: FORT LAUDERDALE, FL 33316

Title: VD (X) Change () Addition

Name: NARDI, FRANK Address: 615 NE 34TH COURT

City-St-Zip: FORT LAUDERDALE, FL 33334

Title: SD (X) Change () Addition

Name: ROBERT, CAROLINA
Address: 3400 NE 1ST AVENUE
City-St-Zip: POMPANO BEACH, FL 33064

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: MADELEINE DUHAIME PD 01/27/2006