


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90433 030 ****61.25

DOCUMENT # N96000004864	
1. Entity Name TEQUESTA OAKS HOMEOWNERS ASSOCIATION, INC.	

Principal Place of Business C/O CAPITAL REALTY HOVISORS 600 SANDTREE DR. SUITE 109 WEST PALM BEACH, FL 33403 US	Mailing Address C/O CAPITAL REALTY HOVISORS 600 SANDTREE DR. SUITE 109 WEST PALM BEACH, FL 33403 US
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

04112007 Chg-NP CR2E037 (12/06)

4. FEI Number 65-0700479	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MCDONALD, DONNA 600 SANDTREE DR. SUITE 109 WEST PALM BEACH, FL 33403

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) **DATE** _____

Filing Fee is \$61.25 Due by May 1, 2007	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
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
VP TURNQUEST, CALVIN 100 TALL OAKS CIR TEQUESTA, FL 33469		DIRECTOR [Blank]	
P HINTON, MARY 12 OAKLAND CT JUPITER, FL 33469	<input type="checkbox"/> Delete	[Blank]	<input type="checkbox"/> Change <input type="checkbox"/> Addition
D OGDEN, WAYNE 24 OAKLAND CT TEQUESTA, FL 33469	<input checked="" type="checkbox"/> Delete	TREASURER JOHN TERZAKIS 6 TALL OAKS CIRCLE TEQUESTA, FL 33469	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
S URAM, JULIE 58 TALL OAKS CIRCLE JUPITER, FL 33469	<input checked="" type="checkbox"/> Delete	SECRETARY REBECCA PRIOLO 82 TALL OAKS CIRCLE TEQUESTA, FL 33469	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
T KAHMANN, JIM 24 LAUREL OAKS CIR JUPITER, FL 33469	<input type="checkbox"/> Delete	VICE PRESIDENT [Blank]	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
[Blank]	<input type="checkbox"/> Delete	[Blank]	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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] **4/27/07** **Printed**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #