


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2008 08:00 A
Secretary of State

DOCUMENT # N98000003501	
1. Entity Name THUNDER CONDO ASSOCIATION, INC.	

Principal Place of Business 1650/1660 WEST 42 STREET HIALEAH, FL 33012	Mailing Address AMERICAN MGMT & REALTY, INC. 2011 WEST 62 STREET HIALEAH, FL 33016
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DO NOT WRITE IN THIS SPACE



04022008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2507288	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

AMERICAN MANGMENT & REALTY, INC.
2011 WEST 62 STREET
HIALEAH, FL 33016

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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, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FARRADAZ, ALDO 1664 WEST 42 STREET HIALEAH, FL 33012
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD FARRADAZ, ADRIANO H 1662 WEST 42 STREET HIALEAH, FL 33012
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GONZALEZ, YARITZA 272 WEST 44 STREET HIALEAH, FL 33012
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04/23/08-80079-003 61.25

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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: Aldo Farradaz **3-27-08** **305-558-9820**

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