2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N98000006679

TI FILED
Sep 26, 2007
Secretary of State

Entity Name: TEQUESTA POINT AT BRICKELL KEY HOMEOWNERS' ASSOCIATION, INC.

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

808 BRICKELL KEY DR #503 MIAMI, FL 33131

Current Mailing Address: New Mailing Address:

808 BRICKELL KEY DR #503 MIAMI, FL 33131

FEI Number: 65-0877399 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TOLAND, GREGG SKRLD INC
501 BRICKELL KEY DRIVE #600 201 ALHAMBRA CIRCLE #1102
MIAMI, FL 33131 US CORAL GABLES, FL 33143 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: LISA LERNER, SECRETARY 09/26/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: P (X) Change () Addition Name: OWENS, STEPHEN L Name: MOREY, DAYSI

Address: 501 BRICKELL KEY DRIVE #600 Address: 901 BRICKELL KEY BLVD #3705

City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33131

Title: D () Delete Title: D (X) Change () Addition

Name: COLAN, BRUCE Name: OWENS, STEVE

Address: 800 BRICKELL KEY DRIVE #1501 Address: 848 BRICKELL KEY DRIVE #BAYLOFT

City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33131

Title: STD () Delete Title: S/T (X) Change () Addition Name: TOLAND, GREGG Name: CACCIOLA, MARCELO

Address: 501 BRICKELL KEY DRIVE #600 Address: 808 BRICKELL KEY DRIVE #1407

City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33131

Title: () Delete Title: VP () Change (X) Addition

Name: CZERNIEC, TIMOTHY

Address: Address: 808 BRICKELL KEY DRIVE #808

City-St-Zip: City-St-Zip: MIAMI, FL 33131

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: DAYSI MOREY P 09/26/2007