2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006679

FILED Feb 06, 2009 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:

SKRLD INC 201 ALHAMBRA CIRCLE #1102 CORAL GABLES, FL 33143

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete ECHEMENDIA, SANTIAGO Name: 808 BRICKELL KEY DRIVE, #3306 Address:

City-St-Zip: MIAMI, FL 33131

Title: () Delete

Name: OWENS, STEVE

Address: 848 BRICKELL KEY DRIVE #BAYLOFT

City-St-Zip: MIAMI, FL 33131

Title: () Delete VON DINCKLAGE, ANDRES Name: 848 BRICKELL KEY DRIVE, #1404 Address:

City-St-Zip: MIAMI, FL 33131

Title: VΡ () Delete CZERNIEC, TIMOTHY Name:

808 BRICKELL KEY DRIVE #808 Address:

City-St-Zip: MIAMI, FL 33131

Title: (X) Delete CZERNIEC, TIMOTHY Name:

808 BRICKELL KEY DRIVE, #808 Address:

City-St-Zip: MIAMI, FL 33131

(X) Change () Addition ESTEVES, XAVIER Name:

Address: 848 BRICKELL KEY DRIVE, # 1604

MIAMI, FL 33131 City-St-Zip:

Title: (X) Change () Addition

Name: OWENS, STEVE

Address: 848 BRICKELL KEY DRIVE #BAYLOFT

City-St-Zip: MIAMI, FL 33131

Title: (X) Change () Addition

Name: SCHWARTZOL, ROBERT

808 BRICKELL KEY DRIVE, # 1801 Address:

City-St-Zip: MIAMI, FL 33131

(X) Change () Addition Title:

Name: CZERNIEC, TIMOTHY H

808 BRICKELL KEY DRIVE #808 Address:

City-St-Zip: MIAMI, FL 33131

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: TIMOTHY H. CZERNIEC Ρ 02/06/2009