2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 07, 2006
Secretary of State

DOCUMENT# P37903

Entity Name: TCR N.F. MULTI-FAMILY, INC.

Current Principal Place of Business:

495 N. KELER RD
MAITLAND, FL 32751 US

New Principal Place of Business:

Current Mailing Address:

6400 CONGRESS AVE.
SUITE 2100
BOCA RATON, FL 33487

New Mailing Address:

FEI Number: 75-2417667 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS ST.
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	PD	( ) Delete
Name:	MCGWIER, MICHAEL	
Address:	2859 PACES FERRY RD.,STE.1100	
City-St-Zip:	ATLANTA, GA 30339	
Title:	DVP	( ) Delete
Name:	TERWILLIGER, J RONALD	
Address:	2859 PACES FERRY RD.	
City-St-Zip:	ATLANTA, GA	
Title:	DVP	( ) Delete
Name:	CROW, HARLAN R.	
Address:	2001 ROSS AVE.	
City-St-Zip:	DALLAS, TX	
Title:	VTS	( ) Delete
Name:	PATTERSON, THOMAS J	
Address:	717 HARWOOD ST. #1200	
City-St-Zip:	DALLAS, TX	
Title:	V	( ) Delete
Name:	KOLAR, ALAN	
Address:	495 N. KELLER RD	
City-St-Zip:	MAITLAND, FL 32751	
Title:	AS	( ) Delete
Name:	STEINHARDT, SHARI	
Address:	6400 CONGRESS AVE.STE 2100	
City-St-Zip:	BOCA RATON, FL 33487	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHARI STEINHARDT AS 03/07/2006

Electronic Signature of Signing Officer or Director Date