2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2008 08:00 AM
Secretary of State

DOCUMENT # 769760

1. Entity Name
TEN-EIGHTY CONDOMINIUM, INC.

Principal Place of Business	Mailing Address
% VASSILIS, TSAGAS 37 BRACKETT ST. BRIGHTON, MA 02135	% VASSILIS, TSAGAS 37 BRACKETT ST. BRIGHTON, MA 02135

DO NOT WRITE IN THIS SPACE

01082008 No Chg-NP CR2E037 (4/06)

4. FEI Number
59-2358344
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

TSAGAS, VASSILIS
1080 92ND ST.
BAY HARBOR ISLANDS, FL 33154

DO NOT WRITE IN THIS SPACE

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	S
NAME	GARCIA, ROBERT
STREET ADDRESS	1086 92ND STREET
CITY-ST-ZIP	BAY HBR ISLANDS, FL
TITLE	TD
NAME	ANTEQUERA, MARJORIE F.
STREET ADDRESS	1082 92ND STREET
CITY-ST-ZIP	BAY HBR ISLANDS, FL
TITLE	PTD
NAME	TSAGAS, VASSILIS
STREET ADDRESS	1080 92ND STREET
CITY-ST-ZIP	BAY HBR ISLANDS, FL
TITLE	VD
NAME	GARCIA, YOLANDA
STREET ADDRESS	1086 92ND STREET
CITY-ST-ZIP	BAY HARBOR ISLAND, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000810867
02/11/08-80003-023 61.25

DO NOT WRITE IN THIS SPACE

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] VASSILIS TSAGAS (PTD) 1-9-08 617-782-2848
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #