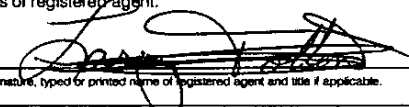
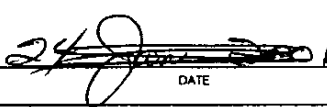
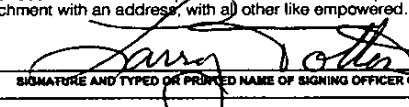


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2006 8:00 am
Secretary of State

01-30-2006 90065 016 ****70.00

DOCUMENT # 721015 1. Entity Name KEY COLONY BEACH COMMUNITY ASSOCIATION, INC.					
Principal Place of Business 600 WEST OCEAN DRIVE KEY COLONY BEACH, FL 33051			Mailing Address P.O. BOX 510884 KEY COLONY BEACH, FL 33057 US		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-2796982	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent WRIGHT, THOMAS D 9711 OVERSEAS HWY. MARATHON, FL 33050			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 \$81.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PATERSON, MARILYN 270 9TH ST. KEY COLONY BEACH, FL 330510125	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEMBERSHIP CHAIRMAN GAIL CORTELYOU 29 CAUSEWAY KEY COLONY BEACH, FL. 33051
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEGRAW, MARIE 270 11TH ST KEY COLONY BEACH, FL 33051	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CORKY SPEARLY P.O. Box 511102 520 12TH ST. KEY COLONY BEACH, FL. 33051
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD TOTTEN, LARRY 181 2ND ST. KEY COLONY BEACH, FL 330510148	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PATRICIA JOSEF-BECKER 24 12TH ST P.O. Box 510767 KEY COLONY BEACH, FL 33051
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DICK, RHODA PO BOX 510388 KEY COLONY BEACH, FL 33051	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TOM PERRY 721 W. OCEAN DR P.O. Box 511132 KEY COLONY BEACH, FL 33051
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRADY, MELISSA 1101 W OCEAN DR PO BOX 51069 KEY COLONY BEACH, FL 330510545	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAURA TESTROT 1001 W. OCEAN DR. P.O. Box 510297 KEY COLONY BEACH, FL. 33051
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, BOB PO BOX 510667 KEY COLONY BEACH, FL 330510667	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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:  1/24/06 (305) 743-2916 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					