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Feb 17 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 726735 (4)

1. Corporation Name
THE CAY CONDOMINIUM INC

Principal Place of Business 601 OCEAN DR W KEY COLONY BEACH FL 33051 US	Mailing Address PO BOX 510069 KEY COLONY BCH FL 33051-0069 US
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3. Date Incorporated or Qualified
06/19/1973

4. FEI Number 59-1506368	Applied For <input type="checkbox"/> Yes <input type="checkbox"/> No
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
 Yes No

9. Name and Address of Current Registered Agent

**STEVENS, RONALD L
601 W. OCEAN DRIVE
KEY COLONY BEACH FL 33051-0069**

10. Name and Address of New Registered Agent

81 Name MILLER, JANICE
82 Street Address (P.O. Box Number is Not Acceptable) 601 W. OCEAN DRIVE
83 City KEY COLONY BEACH
84 State FL
85 Zip Code 33051

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 617.0503, Florida Statutes.

SIGNATURE: *Janice Miller* **PRESIDENT** DATE: **2/6/98**

12. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	STEVENS, RONALD	
STREET ADDRESS	601 W. OCEAN DRIVE	
CITY-ST-ZIP	KEY COLONY BCH. FL 33051-0069	
TITLE	V	<input type="checkbox"/> DELETE
NAME	MILLER, JANICE	
STREET ADDRESS	601 OCEAN DR W	
CITY-ST-ZIP	KEY COLONY BEACH FL 33051	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	STEINER, ROY	
STREET ADDRESS	601 W. OCEAN DRIVE	
CITY-ST-ZIP	KEY COLONY BCH. FL 33051-0069	
TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	WEIL, ARBARA	
STREET ADDRESS	807 OXFORD CREST	
CITY-ST-ZIP	VILLANOVA PA	
TITLE	T	<input checked="" type="checkbox"/> DELETE
NAME	SNAVEELY, THOMAS	
STREET ADDRESS	601 W. OCEAN DRIVE	
CITY-ST-ZIP	KEY COLONY FL 33051-0069	
TITLE	D	<input type="checkbox"/> DELETE
NAME	COLE, TRACY	
STREET ADDRESS	601 W. OCEAN DR.	
CITY-ST-ZIP	KEY COLONY BEACH FL 33051	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	MILLER, JANICE	
1.3 STREET ADDRESS	601 W. OCEAN DRIVE	
1.4 CITY-ST-ZIP	KEY COLONY BEACH, FL. 33051-0069	
2.1 TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	WILLIAM MICHENER	
2.3 STREET ADDRESS	601 OCEAN DR. W. KEY COLONY BEACH, FL.	
2.4 CITY-ST-ZIP	KEY COLONY BEACH, FL. 33051-0069	
3.1 TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	COLE TRACY	
3.3 STREET ADDRESS	601 OCEAN DR. W	
3.4 CITY-ST-ZIP	KEY COLONY BEACH, FL. 33051-0069	
4.1 TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	WEIL, ROBERT	
4.3 STREET ADDRESS	807 OXFORD CREST	
4.4 CITY-ST-ZIP	VILLANOVA, PA. 19085-2054	
5.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	FELLING, MICHAEL	
5.3 STREET ADDRESS	601 OCEAN DR. W.	
5.4 CITY-ST-ZIP	KEY COLONY BEACH, FL. 33051-0069	
6.1 TITLE	D	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	HOFFMAN, MICHAEL	
6.3 STREET ADDRESS	15 MESSENGER LANE	
6.4 CITY-ST-ZIP	SANDS POINT, N.Y. 11050	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Janice Miller* DATE: **2/10/98** TELEPHONE: **305-289-1581**

CR2E037 (10/97)