

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)**

**FILED**  
**May 02, 2006 8:00 am**  
**Secretary of State**

05-02-2006 90215 034 \*\*\*\*61.25



**DOCUMENT # 726735**

1. Entity 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



2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

1st MOORE CR2E037 (10/05)

4. FEI Number

**59-1506368**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**MICHENER, WILLIAM**  
**601 W OCEAN DR**  
**KEY COLONY BEACH FL 33051**

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

*William Michener*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**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

TITILE  Delete  
 NAME MARES, MICHAEL  
 STREET ADDRESS 422 ANCHORAGE COURT  
 CITY-ST-ZIP HAMPTON VA 23666

TITILE  Delete  
 NAME MICHENER, WILLIAM  
 STREET ADDRESS 601 W OCEAN DR  
 CITY-ST-ZIP KEY COLONY BEACH FL 33051

TITILE  Delete  
 NAME TRACY, COLE  
 STREET ADDRESS 601 W OCEAN DR  
 CITY-ST-ZIP KEY COLONY BEACH FL 33051

TITILE  Delete  
 NAME KOLKER, SUZANNE  
 STREET ADDRESS PO BOX 4776  
 CITY-ST-ZIP TIMONIUM MD 21094-4776

TITILE  Delete  
 NAME SELIN, CARL  
 STREET ADDRESS 103 EDGEWOOD DR  
 CITY-ST-ZIP PORT LUDLOW WA 98365

TITILE  Delete  
 NAME WINTERICH, DANIEL  
 STREET ADDRESS 2848 EAST OVERLOOK RD.  
 CITY-ST-ZIP CLEVELAND OH 44118

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITILE  Change  Addition  
 NAME Mcwey Beth  
 STREET ADDRESS 8028 Warren Ave  
 CITY-ST-ZIP Wauwatosa, WI - 53212

TITILE  Change  Addition

TITILE  Change  Addition

TITILE  Change  Addition

TITILE  Change  Addition

TITILE  Change  Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *William Michener*