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**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 753716

1. Corporation Name

KEY COLONY NO. 3- CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

151 CRANDON BOULEVARD
MANAGER'S OFFICE MAIL BOX #1254
KEY BISCAYNE FL 33149

Mailing Address

151 CRANDON BOULEVARD
MANAGER'S OFFICE MAIL BOX #1254
KEY BISCAYNE FL 33149

107058-90044-41 8 *

DEPARTMENT OF STATE



2. Principal Place of Business

21

Suite, Apt. #, etc.

23. City & State

24. Zip Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27. City & State

28. Zip Country

29

30

3. Date Incorporated or Qualified

08/06/1980

4. FEI Number

59-2015029

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

KALLICHE, ANTHONY A
5201 BLUE LAGOON DR
STE 100
MIAMI FL 33126

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

ANTHONY A. KALLICHE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ASD ☐ DELETE

NAME CAMEJO, ANTONIO
STREET ADDRESS 151 CRANDON BLVD #145
CITY-ST-ZIP KEY BISCAYNE FL

TITLE PD ☐ DELETE

NAME SANDLER, WILLIAM
STREET ADDRESS 151 CRANDON BLVD., #444
CITY-ST-ZIP KEY BISCAYNE FL

TITLE D ☐ DELETE

NAME NAVARRO, AVIS HEDGES
STREET ADDRESS 151 CRANDON BLVD., #602
CITY-ST-ZIP KEY BISCAYNE FL 33149

TITLE VP ☐ DELETE

NAME BODIN, PAUL
STREET ADDRESS 151 CRANDON BLVD. #302
CITY-ST-ZIP KEY BISCAYNE FL

TITLE DT ☐ DELETE

NAME BIERIG, CHRISTOPH
STREET ADDRESS 151 CRANDON BLVD., #409
CITY-ST-ZIP KEY BISCAYNE FL

TITLE S ☐ DELETE

NAME KIENE, EVA MARIA
STREET ADDRESS 151 CRANDON BLVD #343
CITY-ST-ZIP KEY BISCAYNE FL

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

ANTONIO NAVARRO
151 CRANDON BLVD # 600
KEY BISCAYNE, FL 33149

DR. R. K. HANNA
151 CRANDON BLVD # 443
KEY BISCAYNE FL 33149

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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/14/99

Date

Daytime Phone #

CR2E037 (11/98)