
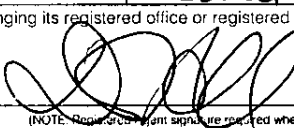
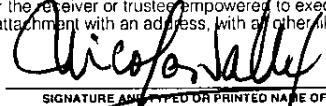


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2005 8:00 am
Secretary of State

02-15-2005 90023 028 ****61.25

DOCUMENT # 753716 1. Entity Name THE EMERALDBAY AT KEY COLONY CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 151 CRANDON BOULEVARD KEY BISCAYNE, FL 33149			Mailing Address 151 CRANDON BOULEVARD MANAGEMENT BOX 1252 KEY BISCAYNE, FL 33149		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 59-2015029	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
Name DAVID ROGEL C/O GEEKER & POLIAKOFF, P.A. Street Address (P.O. Box Number is Not Acceptable) #121 ALHAMBRA PLAZA City Coral Gables FL 33134			Name DAVID ROGEL C/O GEEKER & POLIAKOFF, P.A. Street Address (P.O. Box Number is Not Acceptable) #121 ALHAMBRA PLAZA City Coral Gables FL 33134		
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 DAVID ROGEL  1/13/05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Notarized agent signature is required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	P VALLS, NICOLAS 151 CRANDON BLVD., #1222 KEY BISCAYNE, FL 33149	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RAFAEL A. AZAN 151 CRANDON BLVD #238 KEY BISCAYNE FL, 33149	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KIENE, EVA M 151 CRANDON BLVD., #343 KEY BISCAYNE, FL 33149	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KARL SAGER 151 CRANDON BLVD #1004 KEY BISCAYNE FL 33149	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SARDINAS, OSCAR 151 CRANDON BLVD., #933 KEY BISCAYNE, FL 33149	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KARL SAGER 151 CRANDON BLVD #1004 KEY BISCAYNE FL 33149	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S STEINMULLER-MARTIN, MONICA 151 CRANDON BLVD., #741 KEY BISCAYNE, FL 33149	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KARL SAGER 151 CRANDON BLVD #1004 KEY BISCAYNE FL 33149	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CAMEJO, ANTONIO 151 CRANDON BLVD., #145 KEY BISCAYNE, FL 33149	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KARL SAGER 151 CRANDON BLVD #1004 KEY BISCAYNE FL 33149	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DE LA PEZUELA, GONZALO 151 CRANDON BLVD., #331 KEY BISCAYNE, FL 33149	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KARL SAGER 151 CRANDON BLVD #1004 KEY BISCAYNE FL 33149	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. 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 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:  1/25/05 305 3616947 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
Nicolas Valls, President					