


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 31, 2006 08:00 AM
Secretary of State

DOCUMENT # 766604
1. Entity Name
THE FLORIDA BAY CLUB CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**103500 OVERSEAS HWY
KEY LARGO, FL 33037**

Mailing Address
**P O BOX 2520
KEY LARGO, FL 33037 US**

DO NOT WRITE IN THIS SPACE



01252006 No Chg-NP CR2E037 (11/05)

4. FEI Number
59-2420602 Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**CULLEN, RUSSELL H.
992228 OVERSEAS HWY
SUITE 301-D
KEY LARGO, FL 33037**

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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 \$61.25
Due by May 1, 2006**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LAUTENSLAGER, DAVID 12935 SW 110 AVE MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRIFFIN, LOURDES 12830 SW 43 DR #165B MIAMI, FL 33175
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DR. JAMES TRACTON 12700 BAYSHORE DR. N. MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VDD STANTON, JOHN 1531 NW 90TH WAY PEMBROKE PINES, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S TEEGARDIN, JAMES P 200 FLORIDA AVE TAVERNIER, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SHERMAN, DAVID 2255 GLADES RD #402A BOCA RATON, FL

U00000410157
02/03/06-80022-023 61.25

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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: JAMES P. TEEGARDIN **JAMES P. TEEGARDIN** SEC. 1/27/06 305-451-0101
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #