


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 11, 2006 8:00 am
Secretary of State

05-11-2006 90238 010 ****61.25

DOCUMENT # N04256 1. Entity Name BLUE CRAB KEY CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business C/O MANAGEMENT CONNECTION 8270 COLLEGE PKWY, STE 103 FORT MYERS, FL 33919 US		Mailing Address C/O MANAGEMENT CONNECTION 8270 COLLEGE PKWY, STE 103 FORT MYERS, FL 33919 US	
2. Principal Place of Business P + M Property Management Suite, Apt. #, etc. 15660 San Carlos Blvd, #40 City & State Fort Myers, FL Zip 33908		3. Mailing Address P + M Property Management Suite, Apt. #, etc. 15660 San Carlos Blvd, #40 City & State Fort Myers, FL Zip 33908	
4. FEI Number 59-2682343		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent TEAGUE, GEORGE C/O MANAGEMENT CONNECTION 8270 COLLEGE PKWY, STE 103 FORT MYERS, FL 33919 <i>Paul Sapp</i>		7. Name and Address of New Registered Agent Name Paul Sapp Street Address (P.O. Box Number is Not Acceptable) 40 P + M Property Management 15660 San Carlos Blvd, #40 City Fort Myers FL Zip Code 33908	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
Filing Fee is \$61.25 Due by May 1, 2006		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	D GUY, WALDO <input type="checkbox"/> Delete 5361 BLUE CRAB CIRCLE, # LG BOKEELIA, FL 33422	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD <input type="checkbox"/> Delete GEORGETTE, CELLA 5271 BLUE CRAB CIRCLE, # F4 BOKEELIA, FL 33122	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <input checked="" type="checkbox"/> Delete MORRISON, RICHARD 5441 BLUE CRAB CIR, # R1 BOKEELIA, FL 33922	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete DILLION, JAMES 5441 BLUE CRAB CIRCLE, # R4 BOKEELIA, FL 33922	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD <input checked="" type="checkbox"/> Delete MCNEILLY, JAMES 5481 BLUE CRAB CIR. #T6 BOKEELIA, FL 33922	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: <i>Georgette Cella</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		5/2/06 239 283-1388 <small>Date Daytime Phone #</small>	