

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003428

FILED  
Apr 24, 2007  
Secretary of State

Entity Name: SHADY PALMS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

76777 OVERSEAS HIGHWAY  
ISLAMORADA, FL 33036

**New Principal Place of Business:**

**Current Mailing Address:**

C/O CENTURY 21 ALL KEYS  
1720 N. ROOSEVELT BLVD.  
KEY WEST, FL 33040

**New Mailing Address:**

FEI Number: 20-4702946      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HENDRICK, JAMES T  
317 WHITEHEAD ST.  
KEY WEST, FL 33040      US

**Name and Address of New Registered Agent:**

SANCHEZ, JENNIFER  
1720 N. ROOSEVELT BLVD.  
KEY WEST, FL 33040      US

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.

SIGNATURE: JENNIFER SANCHEZ      04/24/2007  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: SANCHEZ, RALPH  
Address: 5300 U.S. HIGHWAY ONE  
City-St-Zip: KEY WEST, FL 33040

Title: VSD      ( ) Delete  
Name: SANCHEZ, DANIEL  
Address: 5300 U.S. HIGHWAY ONE  
City-St-Zip: KEY WEST, FL 33040

Title: TD      ( ) Delete  
Name: SANCHEZ, ROSE  
Address: 5300 US HWY 1  
City-St-Zip: KEY WEST, FL 33040

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD      (X) Change ( ) Addition  
Name: SANCHEZ, RALPH  
Address: 1720 N. ROOSEVELT BLVD.  
City-St-Zip: KEY WEST, FL 33040

Title: VSD      (X) Change ( ) Addition  
Name: SANCHEZ, DANIEL  
Address: 1720 N. ROOSEVELT BLVD  
City-St-Zip: KEY WEST, FL 33040

Title: TD      (X) Change ( ) Addition  
Name: SANCHEZ, ROSE  
Address: 1720 N. ROOSEVELT BLVD  
City-St-Zip: KEY WEST, FL 33040

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RALPH SANCHEZ      PD      04/24/2007  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date