

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37637

FILED
Apr 30, 2012
Secretary of State

Entity Name: 313 CATHERINE, CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

% PATRICIA A. EABLES
313 CATHERINE ST #3
KEY WEST, FL 33040 US

New Principal Place of Business:

Current Mailing Address:

% PATRICIA A. EABLES
313 CATHERINE ST #3
KEY WEST, FL 33040 US

New Mailing Address:

FEI Number: 65-0244713 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EABLES, PATRICIA A
313 CATHERINE ST
NO. 3
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P
Name: CREHAN, JOSEPH M
Address: 313 CATHERINE STREET, NO. 3
City-St-Zip: KEY WEST, FL 33040

Title: VP
Name: ADAMS, PAM
Address: 313 CATHERINE ST #2
City-St-Zip: KEY WEST, FL 33040

Title: ST
Name: EABLES, PATRICIA A
Address: 313 CATHERINE STREET #3
City-St-Zip: KEY WEST, FL 33040

Title: D
Name: REGER, MELODY
Address: 100 BAY DRIVE
City-St-Zip: KEY WEST, FL 33040

Title: D
Name: DIAZ, RUBEN
Address: 313 CATHERINE ST. #1
City-St-Zip: KEY WEST, FL 33040

I hereby 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 all other like empowered.

SIGNATURE: PATRICIA A. EABLES

S/T

04/30/2012

Electronic Signature of Signing Officer or Director

Date