

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2005 08:00 AM
Secretary of State

DOCUMENT # N02000005982
 1. Entity Name
 1400 WHITE STREET CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business: 1400 WHITE STREET, APT. C, KEY WEST, FL 33040
 Mailing Address: C/O SELINA CLOW, 2604 LAKE VIEW CT., CHURCHVILLE, MD 21028

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01182005 No Chg-NP CR2E037 (10/03)

4. FEI Number: 55-0826760 Applied For: Not Applicable
 5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 HOBGOOD, JARED
 1201 THOMPSON STREET
 KEY WEST, FL 33040

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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, 2005

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	CZERWINSKI, STEVEN E
STREET ADDRESS	2604 LAKEVIEW CT.
CITY-ST-ZIP	CHURCHVILLE, MD 210281515
TITLE	D
NAME	CLOW, SELINA C
STREET ADDRESS	2604 LAKEVIEW CT.
CITY-ST-ZIP	CHURCHVILLE, MD 210281515
TITLE	D
NAME	HOFER, WILLIAM
STREET ADDRESS	34 SHERMAN ST., #2
CITY-ST-ZIP	NEWPORT, RI 02840
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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1110111184457
 11/25/05-80102-008 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Steven E. Czerwinski **STEVEN E. CZERWINSKI** 18 JAN 2005 410436 8355
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #