2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2006
Secretary of State

DOCUMENT# 732671

Entity Name: 709 CURTISS PARKWAY CONDOMINIUM ASSOCIATION INC.

Current Principal Place of Business:

709 CURTISS PARKWAY
MIAMI SPRINGS, FL 33166

New Principal Place of Business:

Current Mailing Address:

709 CURTISS PARKWAY
MIAMI SPRINGS, FL 33166

New Mailing Address:

FEI Number: 59-1640243 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RENNER, SARAH B
709 CURTISS PARKWAY
MIAMI SPRINGS, FL 33166 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:	PD	( ) Delete
Name:	RENNER, SARAH B	
Address:	709 CURTISS PARKWAY #PH	
City-St-Zip:	MIAMI SPRINGS, FL 33166	
Title:	VP	( ) Delete
Name:	WILLIAM, ESPINOSA	
Address:	709 CURTISS PARKWAY #20	
City-St-Zip:	MIAMI SPRINGS, FL 33166	
Title:	D	( ) Delete
Name:	VANN, HARLAN J	
Address:	709 CURTISS PKWY #32	
City-St-Zip:	MIAMI SPRINGS, FL	
Title:	TD	( ) Delete
Name:	HENSHEY, SAMUEL T	
Address:	709 CURTISS PKWY #14	
City-St-Zip:	MIAMI SPRINGS, FL 33166	
Title:	SD	( ) Delete
Name:	LAMBERT, DUDLEY	
Address:	709 CURTISS PKWY #31	
City-St-Zip:	MIAMI SPRINGS, FL 33166	
Title:	DV	( ) Delete
Name:	NA, NA	
Address:	NA	
City-St-Zip:	NA, NA NA NA	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: SARAH B. RENNER RA 01/21/2006

Electronic Signature of Signing Officer or Director — Date