#### 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400002192

Entity Name: MAGNOLIA KEY CONDOMINIUM ASSOCIATION, INC.

FILED Apr 24, 2013 Secretary of State CC3417613224

## **Current Principal Place of Business:**

242 FIFTH AVENUE INDIALANTIC, FL 32903

### **Current Mailing Address:**

P.O. BOX 33307

INDIALANTIC. FL 32903 US

FEI Number: 42-1668536 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

COCHRAN, ROBERT LJR. 242 FIFTH AVENUE INDIALANTIC, FL 32903 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:

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title DP Title S

NameCOCHRAN, ROBERT LJRNameYATES, ROCHELLEAddress242 FIFTH AVENUEAddress242 FIFTH AVE

City-State-Zip: INDIALANTIC FL 32903 City-State-Zip: INDIALANTIC FL 32903

Title DV Title T

Name SIMONI, SHIRLEY Name BROOKS, LINDA

Address 1103 E. RIVER OAKS DR. Address 350 HARWOOD AVE.

City-State-Zip: INDIALANTIC FL 32903 City-State-Zip: SATELLITE BEACH FL 32937

Title DV

Name ZEINFELD, CLARA
Address 505 S. MIRAMAR #2403
City-State-Zip: INDIALANTIC FL 32903

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: LINDA BROOKS SECRET

Electronic Signature of Signing Officer/Director Detail

SECRETARY/TREASURER 04/24/2013

Date