

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723217

FILED  
Apr 10, 2009  
Secretary of State

Entity Name: ANGELFISH CAY CONDOMINIUM CHALETs, NO.4, INC

## Current Principal Place of Business:

10 BARRACUDA LN  
KEY LARGO, FL 33037 US

## New Principal Place of Business:

1 BARRACUDA LN  
KEY LARGO, FL 33037 US

## Current Mailing Address:

10 BARRACUDA LN  
KEY LARGO, FL 33037 US

## New Mailing Address:

1 BARRACUDA LN  
KEY LARGO, FL 33037 US

FEI Number: 59-1507261

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MOSS, EVELYN  
10 BARRACUDA LN  
STE 476  
KEY LARGO, FL 33037 US

## Name and Address of New Registered Agent:

MOSS & ASSOCIATES PROPERTY MGMT.  
1 BARRACUDA LN  
KEY LARGO, FL 33037 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: EVELYN MOSS

04/10/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: S ( ) Delete  
Name: MOSS, EVELYN  
Address: 10 BARRACUDA LN.  
City-St-Zip: KEY LARGO, FL 33037

Title: PD ( ) Delete  
Name: MEYER, TOM  
Address: 10 BARRACUDA LN.  
City-St-Zip: KEY LARGO, FL 33037

Title: ST ( ) Delete  
Name: MORTON, SARAH  
Address: 10 BARRACUDA LN  
City-St-Zip: KEY LARGO, FL 33037

Title: VP ( ) Delete  
Name: ACOSTA, JULIO  
Address: 10 BARRACUDA LN  
City-St-Zip: KEY LARGO, FL 33037

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MEYER, TOM  
Address: 1 BARRACUDA LN.  
City-St-Zip: KEY LARGO, FL 33037

Title: VP (X) Change ( ) Addition  
Name: MORTON, SARAH  
Address: 1 BARRACUDA LN.  
City-St-Zip: KEY LARGO, FL 33037

Title: T (X) Change ( ) Addition  
Name: ACOSTA, JULIO  
Address: 1 BARRACUDA LN  
City-St-Zip: KEY LARGO, FL 33037

Title: S (X) Change ( ) Addition  
Name: MOSS, EVELYN  
Address: 1 BARRACUDA LN  
City-St-Zip: KEY LARGO, FL 33037

I hereby certify that the information supplied with this filing does not qualify 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: EVELYN MOSS

S

04/10/2009

Electronic Signature of Signing Officer or Director

Date