2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005 8:00 am
Secretary of State
04-27-2005 90282 046 ****61.25

DOCUMENT # 725984

1. Entity Name
MAI KAI CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1935 S CONWAY RD ORLANDO, FL 32812 US	1935 S. CONWAY RD. ORLANDO, FL 32812 US

04072005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-1579078 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BETTY J. SMITH, PRESIDENT
1935 S CONWAY RD #E-1
ORLANDO, FL 32812

7. Name and Address of New Registered Agent

Name: Michael A. Couture, President
Street Address (P.O. Box Number is Not Acceptable)
4437 ELAINE PLACE
City: ORLANDO FL Zip Code: 32812

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 _____
Signature, typed or printed name of registered agent and title if applicable. (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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BURKHART, JOYCE 1935 S. CONWAY RD A-2 ORLANDO, FL 32812	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VP SHARP, WILLIAM B 1935 S. CONWAY Rd. S-6 ORLANDO, FL 32812	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT CLARKE, GORDON F 1935 S. CONWAY RD C-2 ORLANDO, FL 32812	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D S Hubbs, Clifford A. 1935 S. Conway Rd-I-7 ORLANDO, FL 32812	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS CARNAHAN, NANCY A 1935 S. CONWAY ROAD, #K-6 ORLANDO, FL 32812	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D T Sperling, John G. 1935 S. Conway Rd-H-1 ORLANDO, FL 32812	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TARTAGLIA, RICHARD 1935 S. CONWAY RD R-3 ORLANDO, FL 32812	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D AT Burr, Joshua W 1935 S. Conway Rd., I-8 ORLANDO, FL 32812	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PEARSALL, MAURICE 1935 S CONWAY RD, A-1 ORLANDO, FL 32812	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Arthur, Philip E. 1935 S. Conway Rd- K-5 ORLANDO, FL 32812	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SMITH, BETTY J 1935 S CONWAY RD, E-2 ORLANDO, FL 32812	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Couture, Michael A 4437 ELAINE PL ORLANDO, FL 32812	☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Michael A. Couture 4-22-05 407-273-2092
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #