

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 01, 2007 8:00 am
Secretary of State

05-01-2007 90018 035 ****61.25

DOCUMENT # 727206

1. Entity Name

PUMPKIN CAY CONDOMINIUM APARTMENTS NO. 12, INC.



Principal Place of Business

Mailing Address

120 ANCHOR DR
KEY LARGO FL 33037
US

120 ANCHOR DR
KEY LARGO FL 33037
US

2. Principal Place of Business - No P.O. Box #

10 Barracuda Lane

3. Mailing Address

10 Barracuda Lane

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Key Largo, FL

City & State

Key Largo, FL

4. FEI Number

59-1536692

Applied For

Not Applicable

Zip
33037

Country
USA

Zip
33037

Country
USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MOSS, EVELYN
120 ANCHOR DR
KEY LARGO FL 33037**

Name

Moss, Evelyn

Street Address (P.O. Box Number is Not Acceptable)

10 Barracuda Lane

City

Key Largo

FL

Zip Code
33037

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

**FILE NOW: FEE IS \$61.25
Due By May 1, 2007**

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

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	MILLER, JAMES	
STREET ADDRESS	120 ANCHOR DR	
CITY - ST - ZIP	KEY LARGO FL 33037	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	HOWELL, GEORGE	
STREET ADDRESS	120 ANCHOR DR	
CITY - ST - ZIP	KEY LARGO FL 33037	
TITLE	S	<input type="checkbox"/> Delete
NAME	MOSS, EVELYN	
STREET ADDRESS	120 ANCHOR DR	
CITY - ST - ZIP	KEY LARGO FL 33037	
TITLE	STD	<input type="checkbox"/> Delete
NAME	DAVIS, ANDREA	
STREET ADDRESS	120 ANCHOR DR	
CITY - ST - ZIP	KEY LARGO FL 33037	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Murray, Robert	
STREET ADDRESS	10 Barracuda Lane	
CITY - ST - ZIP	Key Largo, FL 33037	
TITLE	VPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Friedman, Edwina	
STREET ADDRESS	10 Barracuda Lane	
CITY - ST - ZIP	Key Largo, FL 33037	
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Moss, Evelyn	
STREET ADDRESS	10 Barracuda Lane	
CITY - ST - ZIP	Key Largo, FL 33037	
TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Davis, Andrea	
STREET ADDRESS	10 Barracuda Lane	
CITY - ST - ZIP	Key Largo, FL 33037	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

Evelyn Moss

Evelyn Moss

4/23/07

305-367-3232

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #