

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727206

FILED  
Feb 12, 2009  
Secretary of State

Entity Name: PUMPKIN CAY CONDOMINIUM APARTMENTS NO. 12, INC.

## Current Principal Place of Business:

10 BARRACUDA LANE  
KEY LARGO, FL 33037 US

## New Principal Place of Business:

35 OCEAN REEF DRIVE  
SUITE 138  
KEY LARGO, FL 33037 US

## Current Mailing Address:

10 BARRACUDA LANE  
KEY LARGO, FL 33037 US

## New Mailing Address:

35 OCEAN REEF DRIVE  
SUITE 138  
KEY LARGO, FL 33037 US

FEI Number: 59-1536692

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MOSS, EVELYN  
10 BARRACUDA LANE  
KEY LARGO, FL 33037 US

## Name and Address of New Registered Agent:

CSI MANAGEMENT SERVICES  
35 OCEAN REEF DRIVE  
SUITE 138  
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: TOMAS REMENTERIA

02/12/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MURRAY, ROBERT  
Address: 10 BARRACUDA LANE  
City-St-Zip: KEY LARGO, FL 33037

Title: VD ( ) Delete  
Name: FRIEDMAN, EDWINA  
Address: 10 BARRACUDA LANE  
City-St-Zip: KEY LARGO, FL 33037

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

Title: TD (X) Delete  
Name: DAVIS, ANDREA  
Address: 10 BARRACUDA LANE  
City-St-Zip: KEY LARGO, FL 33037

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: MURRAY, ROBERT  
Address: 35 OCEAN REEF DRIVE SUITE 138  
City-St-Zip: KEY LARGO, FL 33037 US

Title: SC (X) Change ( ) Addition  
Name: REZENDES, MICHAEL  
Address: 35 OCEAN REEF DRIVE SUITE 138  
City-St-Zip: KEY LARGO, FL 33037 US

Title: TR (X) Change ( ) Addition  
Name: DAVIS, ANDREA  
Address: 35 OCEAN REEF DRIVE SUITE 138  
City-St-Zip: KEY LARGO, FL 33037 US

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

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: ROBERT MURRAY

PD

02/12/2009

Electronic Signature of Signing Officer or Director

Date