2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727354

FILED Apr 07, 2009 Secretary of State

Entity Name: KEY BISCAYNE ONE HUNDRED CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:				New Principal Place of Business:			
100 OCEAN #104	N LANE DRIVI	≣					
	YNE, FL 331	49					
Current Mailing Address:				New Mailing Address:			
#104	N LANE DRIVI	_					
FEI Number:		FEI Number Applied For()	FEI Nun	nber Not Appl	icable ()	Certificate of Status Desired ()	
Name and	Address of C	current Registered Agent:		• • • • • • • • • • • • • • • • • • • •	, ,	of New Registered Agent:	
ROMANACH, ALEXANDER 100 OCEAN LANE DR UNIT 305 & 306 KEY BISCAYNE, FL 33149 US				ROMANACH, ALEXANDER PRESIDE 100 OCEAN LANE DR UNIT 305 & 306 KEY BISCAYNE, FL 33149 US			
The above in the State		submits this statement for the p	purpose o	f changing i	ts registere	ed office or registered agent, or both,	
SIGNATURE: ALEXANDER ROMANACH						04/07/2009	
	Electron	ic Signature of Registered Ag	ent			Date	
OFFICERS	AND DIREC	TORS:		ADDITION	S/CHANG	SES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD () ROMANACH, AI 100 OCEAN LN KEY BISCAYNE	DR. #305		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	DVPT () NIETO, CARLO 100 OCEAN LA KEY BISCAYNE	NE DR #405		Title: Name: Address: City-St-Zip:		(X) Change()Addition RLOS N LANE DR #405 AYNE, FL 33149	
Title: Name: Address: City-St-Zip:	S () PRITZLAFF, EII 100 OCEAN LAI KEY BISCAYNE	NE DRIVE		Title: Name: Address: City-St-Zip:		(X) Change()Addition , DONALD N LANE DRIVE #403 AYNE, FL 33149	
Title: Name: Address: City-St-Zip:	CASSADY, DON	NE DRIVE #403		Title: Name: Address: City-St-Zip:		(X) Change()Addition F, EILEEN N LANE DRIVE #501 AYNE, FL 33149	
Title: Name: Address: City-St-Zip:	DE ONA, JORG	NE DRIVE PH #2		Title: Name: Address: City-St-Zip:		(X) Change()Addition ORGE N LANE DRIVE PH #2 AYNE, FL 33149	

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: ALEXANDER ROMANACH PRES 04/07/2009