2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#728960

FILED Jan 23, 2009 Secretary of State

Entity Name: CONTINENTAL INN CONDOMINIUM OF KEY COLONY BEACH, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
	EAN DRIVE WEST ONY BEACH, FL 33051			
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
	.510209 EAN DRIVE WEST ONY BEACH, FL 33051 US			
FEI Number	r: 59-1679432 FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of Current Registered Agent	: Name and Address	of New Registered Agent:	
BECKEŔ 5201 BLU MIAMI, FL The above	DAVID H ESQ & POLIAKOFF, P.A. E LAGOON DRIVE STE # 100 . 33126 US e named entity submits this statement for t te of Florida.	he purpose of changing its registere	ed office or registered agent, or both,	
SIGNATU	Electronic Signature of Registered	Agent	Date	
OFFICERS AND DIRECTORS:		-	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () Delete WALLS, DAVID 1121 W. OCEAN DRIVE KEY COLONY, FL 33051	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () Delete PHILLIPS, LYNN 1121 W. OCEAN DRIVE KEY COLONY, FL 33051	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () Delete MACENAS, FRANK 1121 W. OCEAN DRIVE KEY COLONY, FL 33051	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DT () Delete FARRUGIA, GAIL 1121 W. OCEAN DRIVE KEY COLONY, FL 33051	Title: Name: Address: City-St-Zip:	() Change () Addition	
•	D () Delete	Title:	() Change () Addition	

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: FRANK MACENAS P 01/23/2009