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Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 730137 (7)

1. Corporation Name
PUMPKIN CAY CONDOMINIUM APARTMENTS NO. 9, INC.

Principal Place of Business	Mailing Address
120 ANCHOR DR KEY LARGO FL 33037 US	100 ANCHOR DRIVE. 157 KEY LARGO FL 33037 US

3. Date Incorporated or Qualified: 07/05/1974

4. FEI Number: 59-1536692 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 120 Anchor Drive	26 100 Anchor Drive #476
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Key Largo, FL	City & State 28 Key Largo, FL
Zip 24 33037 Country 25	Zip 29 33037 Country 30

9. Name and Address of Current Registered Agent

BLACK, JANE
100 ANCHOR DR., #157
KEY LARGO FL 33037

10. Name and Address of New Registered Agent

81 Name: Moss, Evelyn
82 Street Address (P.O. Box Number is Not Acceptable): 100 Anchor Drive #476
83
84 City: Key Largo FL 85 Zip Code: 33037

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: [signature] Evelyn Moss 4-27-98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD NEWELL, THADDEUS 100 ANCHOR DR., #157 N. KEY LARGO FL	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	PD Newell, Thaddeus 100 Anchor Drive #476 Key Largo, FL 33037	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT WARNER, WILLIAM 100 ANCHOR DRIVE, 157 KEY LARGO FL	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	D Howland, George 100 Anchor Drive #476 Key Largo, FL 33037	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BLAYLOCK, BRADLEY 100 ANCHOR DRIVE, 157 KEY LARGO FL	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	VD Blaylock, Bradley 100 Anchor Drive #476 Key Largo, FL 33037	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S BLACK, JANE 100 ANCHOR DRIVE, 157 KEY LARGO FL	☒ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	S Moss, Evelyn 100 Anchor Drive #476 Key Largo, FL 33037	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/97)

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] Evelyn Moss 4-27-98 305 367-3232