

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751996

FILED
Apr 23, 2007
Secretary of State

Entity Name: THE SQUARE AT KEY BISCAYNE CONDOMINIUM, INC.

Current Principal Place of Business:

260 CRANDON BLVD
STE 56
KEY BISCAYNE, FL 33149 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 490720
KEY BISCAYNE, FL 33149 US

New Mailing Address:

FEI Number: 59-2255275 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MICHELE & ASSOCIATES
800 CRANDON BLVD #102
KEY BISCAYNE, FL 33149 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: TAGUE, MARY
Address: 260 CRANDON BLVD., #56
City-St-Zip: KEY BISCAYNE, FL 33149

Title: S () Delete
Name: BASICK, DEBBIE
Address: 260 CRANDON BLVD., #56
City-St-Zip: KEY BISCAYNE, FL

Title: VP () Delete
Name: SALA, ROSEMARY
Address: 260 CRANDON BLVD., #56
City-St-Zip: KEY BISCAYNE, FL 33149

Title: PD () Delete
Name: BRISTOL, ROBERT
Address: 260 CRANDON BLVD., #56
City-St-Zip: KEY BISCAYNE, FL

Title: D () Delete
Name: DURHAM, BILL
Address: 260 CRANDON BLVD., #56
City-St-Zip: KEY BISCAYNE, FL 33149

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: BOB BRISTOL

P

04/23/2007

Electronic Signature of Signing Officer or Director

_____ Date