2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#752850

FILED Jan 09, 2006 Secretary of State

me: 3365 PL	ACE CONDOMINIUM ASSOCIA	ATION, INC.		
Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
Current Mailing Address:		New Mailing Address:		
KIENE 20006 D, FL 32862				
: 59-2995711	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address	Name and Address of New Registered Agent:	
DRD W MR. 20006 D, FL 32862	US			
named entity e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,	
RE:				
Electronic Signature of Registered Agent		ent	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
KIENE, FORD PO BOX 6200	W SEC 06	Title: Name: Address: City-St-Zip:	() Change () Addition	
SCHLURAFF, 3365 SOUTH	MICHAEL PRES ATLANTIC AVENUE #3	Title: Name: Address: City-St-Zip:	() Change() Addition	
,	*	Title: Name:	() Change () Addition	
	rincipal Place F. KIENE ATLANTIC AVEACH, FL 32 lailing Addre KIENE 20006 D, FL 32862 F. 59-2995711 I Address of DRD W MR. 20006 D, FL 32862 Inamed entity For Florida. RE: Electro S AND DIRECT MR. (KIENE, FORD PO BOX 6200 ORLANDO, FL MR. (SCHLURAFF, 3365 SOUTH A COCOA BEACE MR. (INTERPRESE OF INTERPRESE OF INTERPRE	rincipal Place of Business: F. KIENE ATLANTIC AVE UNIT 2 EACH, FL 32931 lailing Address: KIENE 20006 D, FL 32862 FEI Number Applied For () I Address of Current Registered Agent: ORD W MR. 20006 D, FL 32862 US Inamed entity submits this statement for the period of Florida. RE: Electronic Signature of Registered Agents S AND DIRECTORS: MR. () Delete KIENE, FORD W SEC PO BOX 620006 ORLANDO, FL 32862 MR. () Delete SCHLURAFF, MICHAEL PRES 3365 SOUTH ATLANTIC AVENUE #3 COCOA BEACH, FL 32931	ATLANTIC AVE UNIT 2 EACH, FL 32931 Saling Address: New Mailing Address	

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: JENNIFER QUIGLEY MS. 01/09/2006