

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 09, 2006
Secretary of State**

DOCUMENT# 752850

Entity Name: 3365 PLACE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

% FORD F. KIENE
3365 SO. ATLANTIC AVE UNIT 2
COCOA BEACH, FL 32931

New Principal Place of Business:

Current Mailing Address:

FORD W. KIENE
PO BOX 620006
ORLANDO, FL 32862

New Mailing Address:

FEI Number: 59-2995711 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KIENE, FORD W MR.
PO BOX 620006
ORLANDO, FL 32862 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: MR. () Delete
Name: KIENE, FORD W SEC
Address: PO BOX 620006
City-St-Zip: ORLANDO, FL 32862

Title: MR. () Delete
Name: SCHLURAFF, MICHAEL PRES
Address: 3365 SOUTH ATLANTIC AVENUE #3
City-St-Zip: COCOA BEACH, FL 32931

Title: MR () Delete
Name: GORDON, ROBERT J VICE PR
Address: 300 OAK ESTATES DRIVE
City-St-Zip: ORLANDO, FL 32806

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:

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

Electronic Signature of Signing Officer or Director

Date