FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 AM 11:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 753716 (0)

1. Corporation Name

KEY COLONY NO. 3- CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
151 CRANDON BOULEVARD MANAGER'S OFFICE MAIL BOX #1254 KEY BISCAYNE FL 33149	151 CRANDON BOULEVARD MANAGER'S OFFICE MAIL BOX #1254 KEY BISCAYNE FL 33149

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/06/1980
3a. Date of Last Report: 04/21/1994
4. FEI Number: 59-2015029 ☐ 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. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business (21) / Suite, Apt. #, etc. (22) / City & State (23) / Zip (24) / Country (25)

2a. Mailing Address (26) / Suite, Apt. #, etc. (27) / City & State (28) / Zip (29) / Country (30)

9. Name and Address of Current Registered Agent

NAUMANN, ARNO K.
1894 TIGERTAIL AVE.
COCONUT GROVE FL 33133

10. Name and Address of New Registered Agent

81 Name: Sean Fisher
82 Street Address (P.O. Box Number is Not Acceptable): 1450 Madruga Avenue, Suite 202
83
84 City: Coral Gables FL 85 Zip Code: 33146

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE X _____ X 4/28/95
Signature, type or print 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	PD		11 TITLE	ATD	☒ Change ☐ Addition
NAME	FOX ROSELLINI, SUSAN		12 NAME	FOX ROSELLINI, SUSAN	
STREET ADDRESS	151 CRANDON BLVD, #210		13 STREET ADDRESS	151 CRANDON BLVD. #208	
CITY-ST-ZIP	KEY BISCAYNE FL		14 CITY-ST-ZIP	KEY BISCAYNE, FL 33149	
TITLE	TD		21 TITLE	PD	☐ Change ☒ Addition
NAME	SACKS, LIONEL	DELETE	22 NAME	SANDLER, WILLIAM	
STREET ADDRESS	151 CRANDON, BLVD., #422		23 STREET ADDRESS	151 CRANDON BLVD. #444	
CITY-ST-ZIP	KEY BISCAYNE FL		24 CITY-ST-ZIP	KEY BISCAYNE, FL 33149	
TITLE	AVPD		31 TITLE	TD	☒ Change ☐ Addition
NAME	KANE, T. JOEL		32 NAME	KANE, T. JOEL	
STREET ADDRESS	151 CRANDON BLVD, #738		33 STREET ADDRESS	151 CRANDON BLVD. #738	
CITY-ST-ZIP	KEY BISCAYNE FL		34 CITY-ST-ZIP	KEY BISCAYNE, FL 33149	
TITLE	ATD		41 TITLE	AVPD	☒ Change ☐ Addition
NAME	ALLPORT, HAMILTON		42 NAME	ALLPORT, HAMILTON	
STREET ADDRESS	151 CRANDON BLVD., #1236		43 STREET ADDRESS	151 CRANDON BLVD. #1236	
CITY-ST-ZIP	KEY BISCAYNE FL		44 CITY-ST-ZIP	KEY BISCAYNE, FL 33149	
TITLE	ATD		51 TITLE	VPD	☐ Change ☒ Addition
NAME	JARAMILLO, SUSAN	DELETE	52 NAME	CAMPO, JORGE	
STREET ADDRESS	151 CRANDON BLVD., #110		53 STREET ADDRESS	151 CRANDON BLVD. #522	
CITY-ST-ZIP	KEY BISCAYNE FL		54 CITY-ST-ZIP	KEY BISCAYNE, FL 33149	
TITLE	AS		61 TITLE	SD	☐ Change ☒ Addition
NAME	NAUMANN, ARNO K.	DELETE	62 NAME	MAYRSOHN, KATHY	
STREET ADDRESS	1894 TIGERTAIL AVE		63 STREET ADDRESS	151 CRANDON BLVD. #902	
CITY-ST-ZIP	COCONUT GROVE FL		64 CITY-ST-ZIP	KEY BISCAYNE, FL 33149	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

(CONTINUED ON PAGE 2)

SIGNATURE: X Hamilton Allport
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

X _____ Date X _____ Daytime Phone #

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KEY COLONY NO. 3 CONDOMINIUM ASSOCIATION, INC.

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13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE	ASD	☐ Change	☒ Addition
1.2 NAME	BODIN, PAUL		
1.3 STREET ADDRESS	151 CRANDON BLVD. #302		
1.4 CITY-ST-ZIP	KEY BISCAYNE, FL 33149		
2.1 TITLE		☐ Change	☐ Addition
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE		☐ Change	☐ Addition
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		☐ Change	☐ Addition
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		☐ Change	☐ Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		☐ Change	☐ Addition
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			