## 2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Jun 29, 2006 **DOCUMENT#758639** Secretary of State

Entity Name: ANN STREET COMPOUND HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

1027 CATHERINE ST 213-219 ANN STREET KEY WEST, FL 33040 KEY WEST, FL 33040

**Current Mailing Address: New Mailing Address:** 

732 PASSOVER LANE 1027 CATHERINE ST KEY WEST, FL 33040 KEY WEST, FL 33040

FEI Number: 59-2329761 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

GEIGER, PAUL HEELS, JOYCE F 732 PASSOVER LANE 1027 CATHERINE ST KEY WEST, FL 33040 US US KEY WEST, FL 33040

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: JOYCE F. HEELS 06/29/2006

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

( ) Delete (X) Change ( ) Addition

MATHEWSON, ROBERT MATHEWSON, ROBERT Name: Name:

217 ANN ST Address: 217 ANN ST Address:

City-St-Zip: KEY WEST, FL 33040 City-St-Zip: KEY WEST, FL 33040

Title: SD Title: SD (X) Change ( ) Addition ( ) Delete Name: HURT, ROBERT Name: HEELS, JOYCE F

Address: 3182 WISE CREEK LANE Address: 732 PASSOVER LANE City-St-Zip: AIKEN, SC 29801 City-St-Zip: KEY WEST, FL 33040

Title: () Delete Title: PD ( ) Change (X) Addition

Name: HUNTER, BRUCE Name:

83 DARWOOD CT, GLOUCESTER AVENUE Address: Address:

City-St-Zip: City-St-Zip: LONDON, EN NW1 7BQ UK

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: JOYCE F HEELS S 06/29/2006