

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000189

FILED
Apr 29, 2008
Secretary of State

Entity Name: GOLDEN KEY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1120-102ND STREET
BAY HARBOR ISLANDS, FL 33154

New Principal Place of Business:

Current Mailing Address:

918 OCEAN DRIVE
207
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 59-1989125 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

KLETZENABUER, HERIBERT
918 OCEAN DRIVE # 207
MIAMI BEACH, FL 33139 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: PD () Delete
Name: MALISSE, MARY
Address: 1120-102ND STREET # 2
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

Title: TD () Delete
Name: MULLER, GISELLE
Address: 1120-102ND STREET # 18
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

Title: S () Delete
Name: BIENER, VALERIE
Address: 1120-102ND ST. #7
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

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 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: MARY MALISSE

PD

04/29/2008

Electronic Signature of Signing Officer or Director

Date