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FILED
Jun 25, 2002 8:00 am
Secretary of State
05-29-2002 90736 031 ****61.25

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000001036

94840

1. Entity Name

SAFE HARBOUR MARITIME CONDOMINIUM ASSOCIATION, I NC.

Principal Place of Business	Mailing Address
7007 SHRIMP RD END OF PIER KEY WEST FL 33040	6810 FRONT ST KEY WEST FL 33040

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	40 KEY HAVEN ROAD Suite, Apt. #, etc.
City & State	City & State: KEY WEST FL
Zip / Country	Zip: 33040 Country: USA

4. FEI Number: NOT APPLICABLE ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HENDRICK, JAMES T 317 WHITEHEAD ST. KEY WEST FL 33041	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD O'CONNELL, JOSEPH J JR. 6810 FRONT ST. KEY WEST FL 33040	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD RENIER, CHARLES H 28-A 12TH AVE. KEY WEST FL 33040	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD GRIFFITHS, KENNETH A JR 40 KEY HAVEN RD. KEY WEST FL 33040	☐ Delete CHange to PRES.	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRES. GRIFFITHS, KENNETH A JR 40 Key Haven Rd Key West FL 33040 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T PATRIARCA, DIRK 6810 FRONT ST. KEY WEST FL 33040	☐ Delete T	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Stephanie Griffiths 40 Key Haven Road Key West, FL 33040 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (9/01)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 4-14-2002 305-296-2633
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #