

**NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED  
Mar 13, 2002 8:00 am  
Secretary of State**

03-13-2002 90105 011 \*\*\*\*61.25

**DOCUMENT #** N01000002809  
1. Entity Name **FLAGLER'S LANDING CONDOMINIUM OWNERS' ASSOCIATION, INC.**

**DO NOT WRITE IN THIS SPACE**

421539

2. Principal Place of Business  
**88 HILTON HAVEN DR.**  
Suite, Apt. #, etc.

3. Mailing Address  
**506 Louisa Street**  
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
**KEY WEST, FL**

City & State  
**Key West, FL**

4. FEI Number  
**65-1156280**

Applied For  
Not Applicable

Zip  
**33040**

Country

Zip  
**33040**

Country

6. Certificate of Status Desired  **\$8.75** Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

7. Name and Address of Current Registered Agent  
Name **Gregory G. Farrelly**  
Street Address (P.O. Box Number is Not Acceptable)  
**Catalfomo & Farrelly**  
**506 Louisa Street**  
City **Key West** **FL** Zip Code **33040**

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  **Gregory G. Farrelly** **February 20, 2002**  
Signature of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

**FEE IS \$61.25  
Initial or Amended UBR**

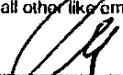
9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

**Make Check Payable to  
Department of State**

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P Charles E. McCoy 88 Hilton Haven Drive Key West, FL 33040</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S, T Merili H. McCoy 88 Hilton Haven Drive Key West, FL 33040</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D Peter McCoy 7B Hilton Haven Drive Key West, FL 33040</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DO NOT WRITE IN THIS SPACE</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D Francesca Grantham 7A Hilton Haven Drive Key West, FL 33040</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D Dulinea Arnold 25 Hilton Haven Drive Key West, FL 33040</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:  **Charles E. McCoy**  
**President (305) 293-8587 Feb. 20, 2002**