

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01218

FILED
Jan 16, 2004
Secretary of State**Entity Name:** KEY WEST HOUSING AUTHORITY MANAGEMENT AND DEVELOPMENT CORPORATION**Current Principal Place of Business:**% HENRY HASKINS
1400 KENNEDY DR.
KEY WEST, FL 33040**New Principal Place of Business:**% J. MANUEL CASTILLO, SR.
1400 KENNEDY DR.
KEY WEST, FL 33040**Current Mailing Address:**% HENRY HASKINS
1400 KENNEDY DR.
KEY WEST, FL 33040**New Mailing Address:**% J. MANUEL CASTILLO, SR.
1400 KENNEDY DR.
KEY WEST, FL 33040**FEI Number:** 59-2473533**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**CASTILLO, MANUEL J
1400 KENNEDY DR.
KEY WEST, FL 33040 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: D () Delete
Name: DEAN, ROBERT,
Address: 418 SIMONTON ST.
City-St-Zip: KEY WEST, FLTitle: D () Delete
Name: MINGO, JUANITA,
Address: 11-D FORT VILLAGE APTS.
City-St-Zip: KEY WEST, FLTitle: P () Delete
Name: TOPPINO, FRANK P,
Address: 37 EVERGREEN AVE
City-St-Zip: KEY WEST, FLTitle: VD () Delete
Name: MURRAY, JACK T.,
Address: PO BOX 2218, NA
City-St-Zip: KEY WEST, FLTitle: D () Delete
Name: SANDS, ROOSEVELT JR.,
Address: 311 CROSS ST.
City-St-Zip: KEY WEST, FLTitle: M () Delete
Name: HASKINS, HENRY V.,
Address: 1400 KENNEDY DR.
City-St-Zip: KEY WEST, FL**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:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: M (X) Change () Addition
Name: J. MANUEL CASTILLO,, SR.
Address: 1400 KENNEDY DR.
City-St-Zip: KEY WEST, FL

I hereby certify that the information supplied with this filing does not qualify for the 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 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: FRANK P. TOPPINO

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01/16/2004

Electronic Signature of Signing Officer or Director

Date