2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # N02000000071

1. Entity Name

PIER 81 CONDOMINIUM ASSOCIATION, INC.



FILED Mar 19, 2007 8:00 am Secretary of State 03-19-2007 90066 031 ****61.25

Principal Plac	e of Business	Mailing Address									
1078 BALD EAGLE DRIVE MARCO ISLAND FL 34145		1078 BALD EAGLE DRIVE MARCO ISLAND FL 34145									
Principal Place of Business - No P.O. Box # 3. Mailing Address							.				0 8} 0
Suile, Apt. #, etc.			Suite, Apt. #, etc.				1st MOORE CR2E037 (10/06)				
City & State			City & State				4. FEI Number 59-3761187				pplied For ot Applicable
Zip	Country	Zi	р	nlry		5. Certificate of Sta		¢0.75 A.1.66		ditional	
	6. Name and Address of Curren	t Registere	ed Agent	!			7. Name and Add	ress of New Re	gistered		
				-	Name						
KILIANSKI, JOSEPH 1078 BALD EAGLE DRIVE MARCO ISLAND FL 34145					Street Address (P.O. Box Number is Not Acceptable)						
MAI	RCU ISLAND FL 34145										
					City				F	L Zip Coo	le
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. I am familiar with, and accept the obligations of registered agent.											
SIGNATURE .	Stgnature, typed or priviled name of registered ager	il and title il ap-	plicable (NOI)	Registeres	i Agent signal	ture required	wien reinstaling)		DATE		
FILE NOW: FEE IS \$61.25 Due By May 1, 2007 9. Election Campaign Trust Fund Contribu					_		\$5.00 May Be Added to Fees			ck Payable artment of	
10.	OFFICERS AND DIRECTORS				ADDITIONS/CHANGES TO OFFICERS AND DIRE				DIRECTORS IN	N 10	
THIF NAME STREET ADDRESS CITY ST-ZIP	PD RUDOLPH, STEVE 1069 BALD EAGLE DRIVE #803 MARCO ISLAND FL 34145				: LADDRESS SLZIP		,		•	☐ Change	Addition
TITLE NAME STREET ADDRESS CHY ST ZIP	TD KILIANSKI, JOSEPH 1079 BALD EAGLE DRIVE #704 MARCO ISLAND FL 34145		☐ Delete	D HILL NAME STREET CHY S		VP	TREASURE	R		Change	Addition
ITHE NAME STREET ADDRESS CITY ST-7IP	SD KRAEMER, THOMAS 1069 BALD EAGLE #504 MARCO ISLAND FL 34145		Delete IIII NAM Siiv CIIV		ET ADO rč oS ST-7IP	SD TAM 1079 MAK	ES A. STIFE BALD EAGL CO IELAND,	□ Change □			
TITLE NAME STREET ADDRESS CITY ST-ZIP			☐ Delete		ET ADDRESS ST-ZIP					☐ Change	☐ Addition
TITLE NAME. STREET ADDRESS CITY ST-ZIP			☐ Delele							☐ Change	Addition
TITLE NAML STREET ADDRESS CITY+ST-ZIP			☐ Delete							☐ Change	Addition

12. I hereby certify that the information supplied with this filing does not gualify for the exemptions contained in Section 119, 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 offect as if made under eath; 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: