

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006486

FILED  
Apr 25, 2009  
Secretary of State

**Entity Name:** KEY LARGO TOWNHOMES ASSOCIATION, INC.

**Current Principal Place of Business:**

3464 NW 99TH WAY  
CORAL SPRINGS, FL 33065

**New Principal Place of Business:**

**Current Mailing Address:**

USA SERVICES  
2771 TREASURE COVE CIRCLE  
FORT LAUDERDALE, FL 33312

**New Mailing Address:**

6915 TAFT STREET  
HOLLYWOD, FL 33024

**FEI Number:** 02-0642982

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SHAPIRO, PAUL  
2771 TREASURE COVE CIRCLE  
FORT LAUDERDALE, FL 33312 US

**Name and Address of New Registered Agent:**

JENNINGS & VALANCY PA  
311 SE 13TH STREET  
FORT LAUDERDALE, FL 33316 US

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: STEVEN VALANCY

04/25/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: RAINER, KIM  
Address: 3464 NW 99TH WAY  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: V ( ) Delete  
Name: DEPASS, AUDREY  
Address: 3462 NW 99TH WAY  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: T (X) Delete  
Name: SUAREZ, JOEL  
Address: 3460 NW 99TH WAY  
City-St-Zip: CORAL SPRINGS, FL 33065

**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: KIM RAINER

P

04/25/2009

Electronic Signature of Signing Officer or Director

Date