2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2006
Secretary of State

DOCUMENT# N02000008263

Entity Name: SOUTHARD AND WHITEHEAD CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

601 WHITEHEAD STREET
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

601 WHITEHEAD STREET
KEY WEST, FL 33040

New Mailing Address:

FEI Number: 11-3672367 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HIGHSMITH, ROBERT E ESQ.
FELMAN KOENIG & HIGHSMITH, P.A.
3158 NORTHSIDE DRIVE
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: BEAN, JAMES
Address: 601 WHITEHEAD STREET
City-St-Zip: KEY WEST, FL 33040

Title: D ( ) Delete
Name: POLLMAN, ROBERT
Address: 601 WHITEHEAD STREET
City-St-Zip: KEY WEST, FL 33040

Title: D ( ) Delete
Name: POLLMAN, NOREEN
Address: 601 WHITEHEAD STREET
City-St-Zip: KEY WEST, FL 33040

Title: D ( ) Delete
Name: BEAN, LINDA
Address: 601 WHITEHEAD STREET
City-St-Zip: KEY WEST, FL 33040

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES BEAN D 02/06/2006

Electronic Signature of Signing Officer or Director — Date