

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002808

FILED  
Mar 24, 2005  
Secretary of State

**Entity Name:** KEY TEX SHRIMP BUILDING CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

7013 OLD SHRIMP RD  
KEY WEST, FL 33040

**New Principal Place of Business:**

**Current Mailing Address:**

4737 OAK RUN DR.  
SARASOTA, FL 34243

**New Mailing Address:**

1114 WHITE ST  
KEY WEST, FL 33040

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PETRAST, ALICE F  
4737 OAK RUN DR.  
SARASOTA, FL 34243 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: P ( ) Delete  
Name: PETRAST, ALICE F  
Address: 4737 OAK RUN DR.  
City-St-Zip: SARASOTA, FL 34243

Title: T ( ) Delete  
Name: PHENT, DAVID  
Address: 1114 WHITE ST.  
City-St-Zip: KEY WEST, FL 33040

Title: D ( ) Delete  
Name: VAN MARTIN, DAVID  
Address: 7013 OLD SHRIMP RD  
City-St-Zip: KEY WEST, FL 33040

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: PFENT, DAVID  
Address: 1114 WHITE ST.  
City-St-Zip: KEY WEST, FL 33040

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 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: DAVID J PFENT

MGR

03/24/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date