

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 29, 2006 8:00 am
Secretary of State

03-29-2006 90129 035 ****70.00

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1. Entity Name

FERNWOOD KEY CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

3191 CORAL WAY
SUITE 201
MIAMI FL 33145

Mailing Address

3191 CORAL WAY
SUITE 201
MIAMI FL 33145

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE CR2E037 (10/05)

4. FEI Number

20-4046898
~~65-1085066~~

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ZUBILLAGA, JUAN
3191 CORAL WAY
SUITE 201
MIAMI FL 33145

Name

ZUBILLAGA MARTA

Street Address (P.O. Box Number is Not Acceptable)

**3191 CORAL WAY
SUITE 201**

City

MIAMI

FL

Zip Code

33145

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

Marta Zubillaga

Signature, typed or printed name of registered agent, if applicable

(NOTE: Registered Agent signature required when reappointing)

3/22/2006

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME ZUBILLAGA, MARTA
STREET ADDRESS 3191 CORAL WAY SUITE 201
CITY-ST-ZIP MIAMI FL 33145

TITLE TD ☐ Delete
NAME MARTINEZ, EDUARDO
STREET ADDRESS 3191 CORAL WAY SUITE 201
CITY-ST-ZIP MIAMI FL 33145

TITLE SD ☐ Delete
NAME ZUBILLAGA, JUAN
STREET ADDRESS 3191 CORAL WAY SUITE 201
CITY-ST-ZIP MIAMI FL 33145

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

Marta Zubillaga

SIGNATURE AND TYPE FOR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/22/2006

305-443-6160