

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006513

FILED
Jul 08, 2008
Secretary of State

Entity Name: CULBREATH KEY BAYSIDE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5000 CULBREATH KEY WAY
TAMPA, FL 33611

New Principal Place of Business:

Current Mailing Address:

550 N REO STREET
SUITE 300
TAMPA, FL 33609

New Mailing Address:

FEI Number: 20-1413793 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

REALMANAGE, LLC
550 N. REO STREET
SUITE 300
TAMPA, FL 33609 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: HIGGENROTHAM, RICHARD
Address: 5000 CULBREATH KEY WAY UNIT4-106
City-St-Zip: TAMPA, FL 33611

Title: D () Delete
Name: KELLEHER, BILL
Address: 5000 CULBREATH KEY WAY #4-308
City-St-Zip: TAMPA, FL 33611

Title: D () Delete
Name: BEACHY, STEPHEN
Address: 5000 CULBREATH KEY WAY UNIT 1305
City-St-Zip: TAMPA, FL 33611

Title: VD () Delete
Name: HAAS, THOMAS
Address: 5000 CULBREATH KEY WAY UNIT 1106
City-St-Zip: TAMPA, FL 33611

Title: D () Delete
Name: DINIZ, STELLA
Address: 5000 CULBREATH KEY WAY #4-204
City-St-Zip: TAMPA, FL 33611

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: DUARTE, NELSON
Address: 5000 CULBREATH KEY WAY UNIT 8327
City-St-Zip: TAMPA, FL 33611

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: THOMAS HAAS

PD

07/08/2008

Electronic Signature of Signing Officer or Director

Date