

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007921

FILED
Apr 29, 2008
Secretary of State

Entity Name: 817 EATON STREET CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

817 EATON STREET
UNIT 1
KEY WEST, FL 33040 US

New Principal Place of Business:

817 EATON STREET
KEY WEST, FL 33040 US

Current Mailing Address:

C/O HARPER BUSINESS SERVICES
PO BOX 4911
KEY WEST, FL 330414911 US

New Mailing Address:

FEI Number: 20-1492508 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HARPER BUSINESS SERVICES INC
323 FLEMING STREET
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: PRES () Delete
Name: LANGTON, LORI
Address: 817 EATON STREET UNIT 1
City-St-Zip: KEY WEST, FL 33040

Title: VP () Delete
Name: OBRIEN, MICHAEL R
Address: 23 FERNCLIFF TERRACE
City-St-Zip: SHORT HILLS, NJ 07078

Title: SEC () Delete
Name: JONES, DAN M
Address: 1202 DUVAL STREET - #31
City-St-Zip: KEY WEST, FL 33040

Title: TREA (X) Delete
Name: KEELEY, KEVIN R
Address: 4015 BAYSHORE BOULEVARD - UNIT 15F
City-St-Zip: TAMPA, FL 33611

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LANGTON, LORI
Address: 817 EATON STREET UNIT 1
City-St-Zip: KEY WEST, FL 33040

Title: VP (X) Change () Addition
Name: OBRIEN, MICHAEL R
Address: 817 EATON STREET UNIT 4
City-St-Zip: KEY WEST, FL 33040

Title: SEC (X) Change () Addition
Name: JONES, DAN M
Address: 1111 12TH ST STE 103
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 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: MICHAEL O'BRIEN

VP

04/29/2008

Electronic Signature of Signing Officer or Director

Date