

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008318

FILED
Feb 22, 2008
Secretary of State

Entity Name: ALBURY COURT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1030 EATON ST
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

725 TRUMAN AVENUE
KEY WEST, FL 33040

New Mailing Address:

FEI Number: 65-1249159

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FONDRIEST, JULIA
725 TRUMAN AVENUE
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: FONDRIEST, JULIA
Address: 725 TRUMAN AVENUE
City-St-Zip: KEY WEST, FL 33040

Title: D () Delete
Name: GARNETT, MARLON
Address: 725 TRUMAN AVENUE
City-St-Zip: KEY WEST, FL 33040

Title: D () Delete
Name: BOWKER, TOM
Address: 1030 EATON ST, UNIT 402A
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:

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: JULIA FONDRIEST

D

02/22/2008

Electronic Signature of Signing Officer or Director

Date