

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008860

FILED
Sep 09, 2006
Secretary of State

Entity Name: MAISON SUR DUVAL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3007 RIVIERA DR.
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

3007 RIVIERA DR.
KEY WEST, FL 33040

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **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:

COVAN, DIANE T
1901 FOGARTY AVENUE #1
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

TOMASZ, NADER F
3007 RIVIERA DR
KEY WEST, FL 33040 US

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: F TOMASZ NADER

09/09/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PDT () Delete
Name: CRENSHAW, WILLIAM L
Address: 3007 RIVIERA DR.
City-St-Zip: KEY WEST, FL 33040

Title: VD () Delete
Name: NADER, TOMASZ
Address: 3007 RIVIERA DR.
City-St-Zip: KEY WEST, FL 33040

Title: SD (X) Delete
Name: MIRA, ROBERTA
Address: 3007 RIVIERA DR.
City-St-Zip: KEY WEST, FL 33040

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSDT (X) Change () Addition
Name: CRENSHAW, WILLIAM L
Address: 3007 RIVIERA DR.
City-St-Zip: KEY WEST, FL 33040

Title: PSDT (X) Change () Addition
Name: NADER, TOMASZ
Address: 3007 RIVIERA DR.
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 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: TOMASZ NADER

PSDT

09/09/2006

Electronic Signature of Signing Officer or Director

Date