

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010024

FILED
May 01, 2007
Secretary of State

Entity Name: KEY WEST IN COCONUT GROVE I CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

10250 SW 110TH STREET
MIAMI, FL 33176

New Principal Place of Business:

2947 SHIPPING AVENUE
MIAMI, FL 33133

Current Mailing Address:

10250 SW 110TH STREET
MIAMI, FL 33176

New Mailing Address:

2947 SHIPPING AVENUE
MIAMI, FL 33134

FEI Number: 41-2185432 **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:

ARRICK, BRUCE A ESQ
9130 SOUTH DADELAND BLVD SUITE 1500
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

SORCE, JOSEPH A ESQ
3211 PONCE DE LEON BLVD
200
CORAL GABLES, FL 33134 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: JOSEPH A. SORCE

05/01/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BAUER, CHAD
Address: 10250 SW 110TH STREET
City-St-Zip: MIAMI, FL 33176

Title: D () Delete
Name: RAPANOS, JOHN
Address: 10250 SW 110TH STREET
City-St-Zip: MIAMI, FL 33176

Title: D () Delete
Name: PARSONS, ANTHONY
Address: 10250 SW 110TH STREET
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LEMOS, ANDRES
Address: 2949 SHIPPING AVENUE
City-St-Zip: MIAMI, FL 33133

Title: D (X) Change () Addition
Name: JEROSCH, ANDREA
Address: 2947 SHIPPING AVENUE
City-St-Zip: MIAMI, FL 33133

Title: D (X) Change () Addition
Name: SORCE, JOSEPH
Address: 2947 SHIPPING AVENUE
City-St-Zip: MIAMI, FL 33173

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: JOSEPH A. SORCE

D

05/01/2007

Electronic Signature of Signing Officer or Director

Date