

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 08, 2009  
Secretary of State**

DOCUMENT# N05000011320

Entity Name: 1700 FLAGLER CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1700 FLAGLER AVE.  
KEY WEST, FL 33040

**New Principal Place of Business:**

**Current Mailing Address:**

1700 FLAGLER AVE.  
KEY WEST, FL 33040

**New Mailing Address:**

FEI Number: 26-0311457      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DIETZEN, BRUCE STD  
1700 FLAGLER 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: PDV ( ) Delete  
Name: FATICA, JACK  
Address: P. O. BOX 5430  
City-St-Zip: KEY WEST, FL 33041

Title: D ( ) Delete  
Name: FATICA, KATHLEEN  
Address: P. O. BOX 5430  
City-St-Zip: KEY WEST, FL 33041

Title: STD ( ) Delete  
Name: DIETZEN, BRUCE  
Address: P. O. BOX 5430  
City-St-Zip: KEY WEST, FL 33041

**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: BRUCE DIETZEN

STD

04/08/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date