


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2008 08:00 A
Secretary of State

DOCUMENT # N08530 1. Entity Name KEY HAVEN CONDOMINIUM, INC.	
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Principal Place of Business 720 W OCEAN DR KEY COLONY BEACH, FL 33051 US	Mailing Address P.O. BOX 510512 KEY COLONY BEACH, FL 33051
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03192008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2671651	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

**CARBIN, ARLINE
720 W. OCEAN DRIVE
CONDO #301
KEY COLONY BCH, FL 33051**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing ☐ **\$5.00** May Be Added to Fees

U000000871698
04/10/08-800008-020 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	T BEAUPRE, BEVERLY K 720 W OCEAN DR 202 KEY COLONY BEACH, FL 330510512
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V MITCHELL, GALE 720 W OCEAN DR 203 KEY COLONY BEACH, FL 33051
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S CARBIN, ARLINE 720 W OCEAN DR # 301 KEY COLONY BEACH, FL 330510512
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P CARBIN, ARLINE 720 W. OCEAN DRIVE # 301 KEY COLONY BEACH, FL 33051
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Arline Carbin, President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-24-08
Date

(305) 289-3577
Daytime Phone #