

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10008

FILED
Apr 02, 2007
Secretary of State

Entity Name: MADEIRA BAY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

82762 OVERSEAS HWY
ISLAMORADA, FL 33036

New Principal Place of Business:

Current Mailing Address:

PO BOX 2053
ISLAMORADA, FL 33036

New Mailing Address:

FEI Number: 65-0031272

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARRIS, LISA
169 PLANTATION SHORES DRIVE
ISLAMORADA, FL 33036 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: PD () Delete
Name: SPILLIS, PETER
Address: 13632 DEERING BAY DR
City-St-Zip: MIAMI, FL 33158

Title: VSTD () Delete
Name: WHITLAM, JOSEPH
Address: PO BOX 47
City-St-Zip: ISLAMORADA, FL 33036

Title: D () Delete
Name: ANDERSON, WILLIAM
Address: PO BOX 68
City-St-Zip: ISLAMORADA, FL 33036

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 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: PETER SPILLIS

PDA

04/02/2007

Electronic Signature of Signing Officer or Director

Date