2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2006 08:00 AM
Secretary of State

DOCUMENT # N14624

1. Entity Name
NEWTON PARK OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1205 NEWTON ST. #3 KEY WEST, FL 33040	1109 DUVAL STREET KEY WEST, FL 33040

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01122006 No Chg-NP CR2E037 (11/05)

4. FEI Number
59-0784478

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

KEY WEST REALTY MANAGEMENT GROUP, INC.
1109 DUVAL STREET
KEY WEST, FL 33040

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

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

100001140736
03/20/06-80023-003 70.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	BORN, GEORGE
STREET ADDRESS	1205 NEWTON ST #3
CITY-ST-ZIP	KEY WEST, FL 33040
TITLE	VPD
NAME	HINDEN, IRENE
STREET ADDRESS	1616 ATLANTIC BLVD., #2
CITY-ST-ZIP	KEY WEST, FL 33040
TITLE	SD
NAME	SORENSON, SERENA
STREET ADDRESS	1203 NEWTON ST. #2
CITY-ST-ZIP	KEY WEST, FL 33040
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: George W. Born
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #