

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30027

FILED
Feb 27, 2006
Secretary of State

Entity Name: THE CUBAN CLUB CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1102-A DUVAL ST
KEY WEST, FL 33040 US

New Principal Place of Business:

Current Mailing Address:

1102 B DUVAL ST
KEY WEST, FL 33040 US

New Mailing Address:

FEI Number: 65-0150520 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DONALDSON, MARY
1901 S. ROOSEVELT BLVD., 403
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: PD () Delete
Name: DONALDSON, MARY
Address: 1901 S. ROOSEVELT BLVD., #403N
City-St-Zip: KEY WEST, FL 33040

Title: VPD () Delete
Name: BRUCOLERI, DOMINIC
Address: 39-12 215TH STREET
City-St-Zip: BAYSIDE, NY 11361

Title: TD () Delete
Name: SADDLER, CONNIE
Address: 1102 A DUVAL ST
City-St-Zip: KEY WEST, FL 33040

Title: SD () Delete
Name: FRANKE, LOUI G.
Address: 1111 12TH STREET, STE. 103
City-St-Zip: KEY WEST, FL

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:

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: MARY DONALDSON

PD

02/27/2006

Electronic Signature of Signing Officer or Director

Date