

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36846

FILED  
Apr 28, 2009  
Secretary of State

**Entity Name:** THE PEGASUS HOUSE CONDOMINIUM OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1106 ANGELA ST.  
KEY WEST, FL 33040 US

**New Principal Place of Business:**

**Current Mailing Address:**

333 FLEMING  
KEY WEST, FL 33040

**New Mailing Address:**

333 FLEMING STREET  
KEY WEST, FL 33040

**FEI Number:** 65-0256338

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SMITH, WAYNE L  
333 FLEMING STREET  
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: PTD ( ) Delete  
Name: LYON, DAUN  
Address: 282 N. PINE CREEK ROAD  
City-St-Zip: FAIRFIELD, CT 06824

Title: D ( ) Delete  
Name: HYNES, JON  
Address: 1416 1/2 DAUPHINE  
City-St-Zip: NEW ORLEANS, LA 70116

Title: SD (X) Delete  
Name: SMITH, WAYNE L  
Address: 333 FLEMING STREET  
City-St-Zip: KEY WEST, FL 33040

**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: DAUN E. LYON

PRES

04/28/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date