


**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 27, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # N94000000430**  
 1. Entity Name  
**THE FOUNDRY HOMEOWNERS' ASSOCIATION, INC.**



Principal Place of Business  
**201 FRONT ST., SUITE 103  
 KEY WEST, FL 33040**

Mailing Address  
**201 FRONT ST., SUITE 103  
 KEY WEST, FL 33040**



02172006 No Chg-NP CR2E037 (11/05)

4. FEI Number  
**65-0919182** Applied For  
 Not Applicable

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

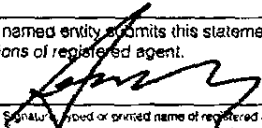
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6. Name and Address of Current Registered Agent

**CHRISTIAN, STERLING J  
 201 FRONT ST., SUITE 103  
 KEY WEST, FL 33040**

**DO NOT WRITE IN THIS SPACE**

8. The above named entity admits 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:  **Stephen C. Porter** 2/21/2006  
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, 2006**

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

00000447803  
 03/08/06-80072-015 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD PORTER, STEVE 375 ROSLYN RD WINSTON SALEM, NC 27104
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD BAUMANN, BRUCE 101 FRONT STREET # 19 KEY WEST, FL 33040
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD SUTAK, DANIEL 631 NORWOOD DR BATAVIA, IL 60510
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:  **STEPHEN Q. PORTER** 2-23-06 305 296 0538  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #