

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000002065

**FILED**  
**Feb 01, 2010**  
**Secretary of State**

**Entity Name:** CAMPBELL COURTYARD CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

617 FLEMING STREET  
KEY WEST, FL 33040

**New Principal Place of Business:**

**Current Mailing Address:**

1109 DUVAL STREET  
KEY WEST, FL 33040 US

**New Mailing Address:**

**FEI Number:** 65-0838509

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

PELTIER, MICHAEL  
2420 ANDALUSIA WAY N.E.  
SAINT PETERSBURG, FL 33704 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:** DP  
**Name:** PELTIER, MICHAEL J MR.  
**Address:** 2420 ANDALUSIA WAY N.E.  
**City-St-Zip:** SAINT PETERSBURG, FL 33704

**Title:** DS  
**Name:** SCHULTZ, MARY LYNNE MS.  
**Address:** 7022 CHANNEL VILLAGE STREET #202  
**City-St-Zip:** ANNAPOLIS, MD 21654

**Title:** DT  
**Name:** SZOT, WALTER MR.  
**Address:** 617 FLEMING # 8  
**City-St-Zip:** KEY WEST, FL 33040

I hereby 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 all other like empowered.

**SIGNATURE:** MICHAEL PELTIER

DP

02/01/2010

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

\_\_\_\_\_  
Date