

**2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**May 27, 2008**  
**Secretary of State**

DOCUMENT# N98000000972

**Entity Name:** LIONSGATE KEY WEST CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**1124 OLIVIA ST  
KEY WEST, FL 33040**New Principal Place of Business:****Current Mailing Address:**336 DUVAL ST  
KEY WEST, FL 33040**New Mailing Address:****FEI Number:** 37-2501922**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**FRIGA, MARK O  
1124 OLIVIA ST  
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:** PT ( ) Delete  
**Name:** POWERS, DAWN  
**Address:** 33 RIDGEWOOD AVE  
**City-St-Zip:** GLEN RIDGE, NJ 07028**Title:** VS ( ) Delete  
**Name:** FRIGA, MARK O  
**Address:** 44 BEVERLY ST  
**City-St-Zip:** ROCHESTER, NY 14610**Title:** ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:****ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** P (X) Change ( ) Addition  
**Name:** FRIGA, MARK O  
**Address:** 44 BEVERLY STREET  
**City-St-Zip:** ROCHESTER, NY 14610 US**Title:** V (X) Change ( ) Addition  
**Name:** GONZALEZ, TINO  
**Address:** 1126 OLIVIA ST  
**City-St-Zip:** KETWEST, FL 33040 US**Title:** S ( ) Change (X) Addition  
**Name:** FRIGA, CINDY L  
**Address:** 44 BEVERLY ST  
**City-St-Zip:** ROCHESTER, NY 14610 US**Title:** T ( ) Change (X) Addition  
**Name:** ADAMS, MARGARET  
**Address:** 1120 OLIVIA ST  
**City-St-Zip:** KEY WEST, FL 33040

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: MARK O FRIGA

P

05/27/2008

Electronic Signature of Signing Officer or Director

Date