

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 8:00 am
Secretary of State

01-23-2006 90125 041 ****61.25

DOCUMENT # N98000001000 1. Entity Name COCONUT KEY CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 3046 ORANGE ST. COCONUT GROVE, FL 33133 US			Mailing Address 299 ALHAMBRA CIRCLE SUITE 404 CORAL GABLES, FL 33134-5114 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
				Country	
4. FEI Number 65-0843037				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RAMOS, ANTONIO F 299 ALHAMBRA CIRCLE SUITE 404 CORAL GABLES, FL 33134-5114				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCCALL, GEORGE 3050 ORANGE STREET COCONUT GROVE, FL 33133		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCCALL, JR., GEORGE D. 3052 ORANGE STREET COCONUT GROVE, FL 33133-4577	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TOLBA, NATASHA 3060 ORANGE ST COCONUT GROVE, FL 33133 - 4578		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHEN, STEPHEN 3048 ORANGE ST. COCONUT GROVE, FL 33133		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHENK, STEPHAN 3048 ORANGE STREET COCONUT GROVE, FL 33133-4576	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHIN, DONOVAN C. 3052 ORANGE STREET COCONUT GROVE, FL 33133-4577	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DE VILLADA, CATHERINE 3054 ORANGE STREET COCONUT GROVE, FL 33133-4577	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MC DONALD, MARIA P. 3046 ORANGE STREET COCONUT GROVE, FL 33133-4576	
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: <u>George McCall</u> JANUARY 18, 2006 (305) 461-0667					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					