

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 13, 2006 8:00 am**  
**Secretary of State**

03-13-2006 90075 038 \*\*\*150.00

**DOCUMENT # P94000024797**

1. Entity Name  
**OCEAN REEF CLUB RENTAL PROPERTIES, INC.**



Principal Place of Business  
**35 OCEAN REEF DRIVE  
SUITE 200  
KEY LARGO, FL 33037 US**

Mailing Address  
**35 OCEAN REEF DRIVE  
SUITE 200  
KEY LARGO, FL 33037 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**Suite 200 EO**

City & State

City & State

02152006

Chg-P

CR2E034 (11/05)

4. FEI Number  
**65-0481714**

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LUBAN, KENNETH A  
35 OCEAN REEF DRIVE  
SUITE 200  
KEY LARGO, FL 33037**

Name

Street Address (P.O. Box Number is Not Acceptable)

**Ste 200 EO**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VD  
ASTBURY, PAUL M.G.  
35 OCEAN REEF DRIVE SUITE 200  
KEY LARGO, FL 33037** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P  
CONFORTI, KATHLEEN A  
35 OCEAN REEF DRIVE SUITE 200  
KEY LARGO, FL 33037** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P  
William H. Dickinson  
35 Ocean Reef Drive, Suite 200 EO  
Key Largo, FL 33037** ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VT  
CARDER, SUZANNE C  
35 OCEAN REEF DRIVE SUITE 200  
KEY LARGO, FL 33037** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Carder, Suzanne  
Ste 200 EO** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VPS  
LUBAN, KENNETH  
35 OCEAN REEF DRIVE SUITE 200  
KEY LARGO, FL 33037** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Ste 200 EO** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

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 607, 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:** **Kenneth A. Luban**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3/1/06**

Date

**305-367-5850**

Daytime Phone #