

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 09, 2005 8:00 am
Secretary of State

02-09-2005 90050 041 ****61.25

DOCUMENT # 704023

1. Entity Name

SOUTH MANASOTA KEY ASSOCIATION, INC.



Principal Place of Business

2840 A NO BEACH RD
ENGLEWOOD FL 34223
US

Mailing Address

2840 A NO BEACH RD
ENGLEWOOD FL 34223
US

50012560



1st MOORE

CR2E037 (10/04)

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

65-0122140

Applied For

Not Applicable

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

HOFFSETTER, JUDY
2840 A N BEACH RD
ENGLEWOOD FL 34223

Name

KEISER, BETTY ANN

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

5095 N. BEACH RD

C-5

City

ENGLEWOOD

FL

Zip Code

34223

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 BETTY ANN KEISER, TREASURER

Betty Ann Keiser

2-3-05

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By: May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PE ☐ Delete
NAME LARGENT, WAYNE
STREET ADDRESS 30 PEARL ST.
CITY-ST-ZIP ENGLEWOOD FL 34223

TITLE S ☐ Delete
NAME CARROLL, BETTY SUE
STREET ADDRESS 3085 BAY OAKS CIRCLE
CITY-ST-ZIP ENGLEWOOD FL 34223

TITLE TD ☒ Delete
NAME HOFFSTATTER, JUDY
STREET ADDRESS 2840 A NORTH BEACH RD
CITY-ST-ZIP ENGLEWOOD FL 34223

TITLE VP ☐ Delete
NAME PARKER, STANLEY
STREET ADDRESS 2418 N. BEACH RD
CITY-ST-ZIP ENGLEWOOD FL 34223

TITLE PD ☐ Delete
NAME GALBERAITH, B J
STREET ADDRESS 185 MOCKINGBIRD LANE
CITY-ST-ZIP ENGLEWOOD FL 34223

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE TREASURER ☒ Change ☐ Addition
NAME BETTY ANN KEISER
STREET ADDRESS 5095 N. BEACH RD.
CITY-ST-ZIP ENGLEWOOD, FL 34223

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Betty Ann Keiser (BETTY ANN KEISER) 2-3-05 474-0742

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #