2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2007 8:00 am
Secretary of State
03-16-2007 90032 007 ****61.25

DOCUMENT # 704023

1. Entity Name
SOUTH MANASOTA KEY ASSOCIATION, INC.

Principal Place of Business	Mailing Address
30 PEARL ST ENGLEWOOD, FL 34223 US	30 PEARL ST ENGLEWOOD, FL 34223 US

03142007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
2810 N Beach Rd	52 Sunrise Dr
Suite, Apt. #, etc.: D-205	Suite, Apt. #, etc.:
City & State: Englewood FL	City & State: Englewood FL
Zip: 34223 Country: Charlotte	Zip: 34223 Country: Charlotte

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
LARGENT, JOHN T 52 SUNRISE DR ENGLEWOOD, FL 34223	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2007

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PE LARGENT, WAYNE 30 PEARL ST. ENGLEWOOD, FL 34223	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President STUMP, STEVE 2810 N Beach Rd D-205 Englewood FL 34223	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S CARROLL, BETTY SUE 3085 BAY OAKS CIRCLE ENGLEWOOD, FL 34223	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T LARGENT, JOHN T 52 SUNRISE DR ENGLEWOOD, FL 34223	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP PARKER, STANLEY 2418 N. BEACH RD ENGLEWOOD, FL 34223	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD GALBERAITH, B J 185 MOCKINGBIRD LANE ENGLEWOOD, FL 34223	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Past President LARGENT, WAYNE 30 PEARL ST ENGLEWOOD FL 34223	☐ 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 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: John Largent John Largent, Treas. 3/14/07 941-475-0151
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #