2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 704023

1. Entity Name

SIGNATURE:

SOUTH MANASOTA KEY ASSOCIATION, INC.



FILED Jan 08, 2003 8:00 am Secretary of State 01-08-2003 90004 046 ****61.25

				OO WE TO				
Principal Place of Business 2840 A NO BEACH RD ENGLEWOOD FL 34223 US		Mailing Address 2840 A NO BEACH RD ENGLEWOOD FL 34223 US			7 	818 [4 88][8 1][8 8][8][8 1 8][8	<u> </u>	(
2. Principal F	Place of Business	3. Mailing Address						
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES			
City & State		City & State			4. FEI Number 65-0122140			Applied For
Zip	Country	Zip	Country		5. Certificate of Sta	tus Desired	\$8.75 A Fee Requi	dditional
ş	6. Name and Address of Current Re	gistered Agent	1		7. Name and Addre	ess of New Register	ed Agent	
	Nam	ne						
2840 A N	<i>floffstatteve</i> Iter, Judy I Beach RD			Street Address (P.O. Box Number is Not Acceptable)				
ENGLEW	OOD FL 34223						1= 0	
			City			F		ае
	named entity submits this statement for the lions of registered agent.	e purpose of changing its	registered offic	e or register	ed agent, or both, in th	ne State of Florida. Ta	am familiar with	n, and accept
SIGNATURE .	Signature, typed or printed name of registered agent and	title if applicable. (NOT)	E: Registered Agent s	ignature required	when reinstating)	DAT	Œ	
FILE NOW: FEE IS \$61.25 9. Election Car Trust Fund C			npaign Financir Contribution.	ng 🔲	\$5.00 May Be Added to Fees	Make Ch Florida Dep	eck Payable partment of	
10.	OFFICERS AND DIREC	CTORS	11.		ADDITIONS/CHANGES	S TO OFFICERS AND	DIRECTORS	IN 10
TITLE	PD	Delete Delete	TITLE				☐ Change	Addition
NAME	HAMBLETON, FRANK	/ \	NAME					
STREET ADDRESS CITY-ST-ZIP	155 SAND DOLLAR LANE ENGLEWOOD FL 34223		STREET ADDRE	ESS				
TITLE	D	☐ Delete	TITLE		<u> </u>		☐ Change	- Addition
NAME	DASHER, BARRY	Delete	NAME				□ Change	Addition
	3075 BAY OAKS CIR		STREET ADDRE	ESS				
CITY-ST-ZIP	ENGLEWOOD FL		CITY-ST-ZIP					
TITLE	SD HOFFSTATTE	R □ Delete	TITLE	<u> </u>			☐ Change	☐ Addition
NAME	HOFFSETTER, JUDY		NAME				_ ,	-
STREET ADDRESS	2840 A BEACH		STREET ADDRE	ess				
CITY-ST-ZIP	ENGLEWOOD FL 34223		CITY-ST-ZIP					
TITLE	TD HOFFS-ATTER	☐ Delete	TITLE				☐ Change	☐ Addition
NAME	HOFFSETTER, JUDY		NAME					
STREET ADDRESS CITY-ST-ZIP	2840 A NORTH BEACH RD		STREET ADDRE	:55				
	ENGLEWOOD FL 34223		-	-				
TITLE NAME	PARKER, STANLEY	☐ Delete	TITLE				∐ Change	Addition
STREET ADDRESS	2418 N. BEACH RD		NAME STREET ADDRE	282				
CITY-ST-ZIP	ENGLEWOOD FL 34223	,	CITY-ST-ZIP					
TITLE	PD GALBERAT	TH Delete	TITLE				☐ Change	Addition
NAME	GALBERRITH, B J	77 LI Delete	NAME				change	Addition
STREET ADDRESS	185 MOCKINGBIRD LANE		STREET ADDRE	ss				
CITY-ST-ZIP	ENGLEWOOD FL 34223		CITY-ST-ZIP					
12. I hereby o	certify that the information supplied with thi on this report or supplemental report is tru	s filing does not qualify for	the exemption	stated in Sec	ction 119.07(3)(i), Flori	da Statutes, I further	certify that the	information
of the cor	poration or the receiver or trustee empowe	ered to execute this report	as required by (Chapter 617,	, Florida Statutes; and	that my name appear	rs in Block 10 o	or Block 11 if
cnanged,	or on an attachment with an address, with	all other like empowered.						

1/6/03

94-474-2434