2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2011
Secretary of State

DOCUMENT# 705431

Entity Name: MANASOTA KEY ASSOCIATION, INC.

Current Principal Place of Business:

6920 MANASOTA KEY ROAD
ENGLEWOOD, FL 34223

New Principal Place of Business:

Current Mailing Address:

P O BOX 343
ENGLEWOOD, FL 342957343

New Mailing Address:

FEI Number: 59-2150584 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MICHELINI, LAURA
6920 MANASOTA KEY RD.
ENGLEWOOD, FL 34223 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: S
Name: POTTER, ROBERT
Address: 8270 MANASOTA KEY RD
City-St-Zip: ENGLEWOOD, FL 34223

Title: VP
Name: GEIST, JOHN
Address: 7185 MANASOTA KEY RD
City-St-Zip: ENGLEWOOD, FL 34223

Title: P
Name: HESS, DICK
Address: 8285 MANASOTA KEY RD
City-St-Zip: ENGLEWOOD, FL 34223

Title: T
Name: MICHELINI, LAURA
Address: 6920 MANASOTA KEY RD
City-St-Zip: ENGLEWOOD, FL 34223

Title: D
Name: WHITE BOLD, CAROL
Address: 8017 MANASOTA KEY RD
City-St-Zip: ENGLEWOOD, FL 34223

Title: D
Name: BOONE, CHRISTINE
Address: 7235 MANASOTA KEY RD
City-St-Zip: ENGLEWOOD, FL 34223

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: LAURA MICHELINI TREA 01/25/2011

Electronic Signature of Signing Officer or Director — Date