**FILED** 

## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Apr 16, 2001 8:00 am Secretary of State DOCUMENT # N0000005993 1. Entity Name ISLAND OF KEY LARGO FEDERATION OF HOMEOWNER ASSO 04-16-2001 90050 021 \*\*\*\*61.25 Principal Place of Business Mailing Address 428 COLLINS ST. 428 COLLINS ST. KEY LARGO FL 33037 KEY LARGO FL 33037 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-1062501 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Monroe Fee Required **3**03 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) WINKLER, BARBARA 428 COLLINS ST. KEY LARGO FL 33037 Zip Code City 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. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Change Change Addition ☐ Delete TITLE PD TITLE NAME LANCASTER, RICHARD NAME STREET ADDRESS STREET ADDRESS 109 ELLINGTON CT. CITY-ST-ZIP CITY-ST-ZIP TAVERNIER FL 33070 ☐ Change Addition TITI F Delete TITLE NAME NICKERSON, FRED NAME STREET ADDRESS STREET ADDRESS 138 MARINA AVE. CITY-ST-ZIP CITY-ST-ZIP KEY LARGO FL 33037 - 🖃 Change TITLE\* Delete NAME WILKINSON, MARY L NAME STREET ADDRESS STREET ADDRESS 38 E. BEACH RD. CITY-ST-ZIP CITY-ST-ZIP TAVERNIER FL 33070 Burke Cannon ☐ Change Addition Delete TITLE 149 Westminster Dr NAME NICKERSON, ANN TAVERNIER, FL 33070 STREET ADDRESS STREET ADDRESS 138 MARINA AVE. CITY-ST-ZIP CITY-ST-ZIP KEY LARGO FL 33037 🗹 Delete Change Addition lay Pino TITLE TITLE NAMÉ NAME WINKLER, BARBARA 304 Lance Lane STREET ADDRESS STREET ADDRESS 428 COLLINS ST. Key Largo, FL 33037 CITY-ST-7/P CITY-ST-ZIP KEY LARGO FL 33037 TITLE S Addition Delete Mae Schaad Change TITLE NAME NAME MUELLER, BONNIE 98 Gult-stream Dr STREET ADDRESS STREET ADDRESS 119 ELLINGTON CT. Keu FL 33037 hango. CITY-ST-ZIP CITY-ST-ZIP TAVERNIER FL 33070

2. 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 reports 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 en powered 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, withyall other like/emprovered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Davime Phor