

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

DOCUMENT # N04256

1. Entity Name

BLUE CRAB KEY CONDOMINIUM ASSOCIATION, INC.



FILED

03 MAY -1 AM 10:43

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



☐ CHECK HERE IF MAKING CHANGES

Principal Place of Business

C/O HENKE PROPERTY MANAGEMENT, INC  
6213-A PRESIDENTIAL COURT  
FT MYERS FL 33919  
US

Mailing Address

C/O HENKE PROPERTY MANAGEMENT, INC  
6213-A PRESIDENTIAL COURT  
FT MYERS FL 33919  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-2682343

Applied For

Not Applicable

Zip

Country

Zip

Country

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

HENKE, CAROL J  
HENKE PROPERTY MANAGEMENT INC  
6213-A PRESIDENTIAL COURT  
FT MYERS FL 33919

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

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

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 D ☒ Delete  
NAME DAKOS, NICHOLAS  
STREET ADDRESS 5280 BLUE CRAB CIRCLE  
CITY-ST-ZIP BOKEELIA FL 33922

TITLE ☐ Change ☒ Addition  
NAME D Hornsby, James  
STREET ADDRESS 5431 Blue Crab Circle, Q2  
CITY-ST-ZIP Bokeelia, FL 33928

TITLE TD ☐ Delete  
NAME HORNSBY, THOMAS  
STREET ADDRESS 5261 BLUE CRAB CIRCLE #E5  
CITY-ST-ZIP BOKEELIA FL 33922

TITLE ST ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 800017841588  
CITY-ST-ZIP 05/01/03--01071--022 \*\*61.25

TITLE DVP ☐ Delete  
NAME KELLER, BILL  
STREET ADDRESS 5411 BLUE CRAB CIR., P2  
CITY-ST-ZIP BOKEELIA FL 33922

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

TITLE SD ☐ Delete  
NAME GOLDSWORTHY, EARL  
STREET ADDRESS BLUE CRAB CIRCLE  
CITY-ST-ZIP BOKEELIA FL 33922

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

TITLE PD ☒ Delete  
NAME STIDWELL, JAMES  
STREET ADDRESS 5301 BLUE CRAB CIRCLE, STE #14  
CITY-ST-ZIP BOKEELIA FL 33922

TITLE PD ☐ Change ☒ Addition  
NAME Owens, Charlie Jr  
STREET ADDRESS 5411 Blue Crab Circle, P4  
CITY-ST-ZIP Bokeelia, FL 33928

TITLE ☐ Delete  
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:

CHARLES V. OWENS JR

4-16-2003

239-481-7150

CR2E037 (10/02)