

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000009343

Entity Name: NORTH KEY LARGO UTILITY CORP.**Current Principal Place of Business:**35 OCEAN REEF DRIVE
SUITE 220
KEY LARGO, FL 33037**Current Mailing Address:**24 DOCKSIDE LANE
PMB #512
KEY LARGO, FL 33037**FEI Number:** 65-0545336**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JENKINS, JOHN R P.A.
NABORS GIBLIN & NICKERSON
P.O.BOX 11008
TALLAHASSEE, FL 32302 US*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**Officer/Director Detail :**

Title	VP
Name	OELTJEN, JEFFREY
Address	2002 SE 17TH AVE
City-State-Zip:	HOMESTEAD FL 33035

Title	C
Name	MCCLURE, DONALD G
Address	80 SNAPPER LANE
City-State-Zip:	KEY LARGO FL 33037

Title	D
Name	BAXTER, TERRY
Address	24 DOCKSIDE LANE, PMB 117
City-State-Zip:	KEY LARGO FL 33037

Title	D
Name	DEWEY, KEN
Address	9 HARBOUR GREEN DR
City-State-Zip:	KEY LARGO FL 33037

Title	P
Name	RITZ, DAVID C
Address	24 DOCKSIDE LANE # 241
City-State-Zip:	KEY LARGO FL 33037

Title	D
Name	WISHNACK, MARSHALL
Address	4 CANNON PT
City-State-Zip:	KEY LARGO FL 33037

Title	D
Name	MAST, ALFRED
Address	7 HARBOUR GREEN DR
City-State-Zip:	KEY LARGO FL 33037

Title	DIRECTOR
Name	SCHMETTERER, ROBERT
Address	24 DOCKSIDE LANE PMB 398
City-State-Zip:	KEY LARGO FL 33037

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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: GREGORY LUNSFORD

VP

02/01/2016

Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title DIRECTOR
Name FOSTER , MICHAEL
Address 35 HARBOUR GREEN
City-State-Zip: KEY LARGO FL 33037

Title TREASURER, VP
Name MARQUARDT, ELIZABETH A
Address 24 DOCKSIDE LANE
PMB #505
City-State-Zip: KEY LARGO FL 33037

Title DIRECTOR
Name LEEMHUIS, MIKE
Address 35 OCEANREEF DR
SUITE 200
City-State-Zip: KEY LARGO FL 33037

Title D
Name WEISLEDER, BROOKE
Address 41 ANCHOR DR. UNIT B
City-State-Zip: KEY LARGO FL 33037

Title VP
Name LUNSFORD, GREGORY
Address 24 DOCKSIDE LANE
PMB #505
City-State-Zip: KEY LARGO FL 33037

Title SECRETARY
Name ATWILL, KELLY
Address 24 DOCKSIDE LANE
PMB #512
City-State-Zip: KEY LARGO FL 33037