2002 UNIFORM BUSINESS REPORT (UBR)
OCUMENT # 720769

DOCUMENT # 720769 1. Entity Name			FILED		
DUCK KEY PROPERTY OWNERS ASSOCIATION	,	02	OCT 29 AM	9:51	
Principal Place of Business Address POST OFFICE BOX 2606 OFFICE BOX 260 MARATHON SHORES FL 33052-2606 ATHON SHORES F		SE	ECRETARY OF : LIAHASSEE, FL	STATE ORIDA 	
2. Principal Place of Business vialling Address					
Suite, Apt. #, etc.] '	DO NOT WRITE IN TH	IIS SPACE	
City & State		4. FEI Number	-7295522	\vdash	Applied For
Zip Country Zip	Country	5. Certificate of Sta		\$8.75 A	
6. Name and Address			ess of New Registers	Fee Requi	red
The state of the s	Name -	1 - 7)		. =
HELBLING, JUNE	Street Addres	is (P.O. Box Number is No HARBOUR	ot Acceptable)		
1103 INDIES DR S DUCK KEY FL 33050	Duck				
DOCK KET PL 33050	City	Key, +	<u>L 33050</u>	Zip Co	xde
The above named entity submits this statement for the purpose of changing the obligations of registered agent.	its registered office or regis	tered agent or both in th			
SIGNATURE At	NOTE: Registered Agent signature requ	red when reinstating)	DATE	<u> </u>	
After September 13, 2002, 9. Election Commin. will be \$236.25.		\$5.00 May Be Added to Fees	Make Che	ck Payable	
After September 13, 2002, 9. Election Commin. will be \$236.25. Trust Fundamental Differences	NOTE: Registered Agent signature requi	\$5.00 May Be	Make Che Departm	ck Payable ent of Stat	e
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After September 13, 2002, p. Election C. Trust Fund 10. OFFICERS AND DIRECTORS TITLE NAME WOLFE, JOHN 253 W SEAVIEW CR DUCK KEY FL 33050 TITLE VPD NORRIS, JOAN 198 INDIES DR S	Campaign Financing d Contribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	\$5.00 May Be Added to Fees ADDITIONS/CHANGES PD Arrian, Arrthu K. Scau V. Scau HSchalk, E	Make Che Departm TO OFFICERS AND E	ck Payable sent of Stat DIRECTORS II	N 10
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12. I hereby certify that the information supplied with this filing does not quality 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

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9-6-02

305-289-017

Daytime Phone #