

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # 729109

1. Entity Name

BELLEAIR KEY ASSOCIATION, INC.



**FILED**  
**Mar 07, 2007 08:00 AM**  
**Secretary of State**

Principal Place of Business

3400 GULF BLVD.  
#307  
BELLEAIR BEACH FL 33786  
US

Mailing Address

3400 GULF BLVD.  
#307  
BELLEAIR BEACH FL 33786  
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

59-1809716

Applied For

Not Applicable

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

WHIPPLE, THOMAS A  
3400 GULF BLVD.  
#307  
BELLEAIR BEACH FL 33786

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 re-registering)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2007**

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

TITLE P ☐ Delete  
NAME SPRINGER, RAYMOND  
STREET ADDRESS 3410 GULF BLVD., #106  
CITY-ST-ZIP BELLEAIR BEACH FL 33786

TITLE VD ☐ Delete  
NAME ELLIS, SALLY  
STREET ADDRESS 3112M EMERSON ST.  
CITY-ST-ZIP TAMPA FL 33629

TITLE VD ☐ Delete  
NAME KAISER, CHARLIE  
STREET ADDRESS 11512 MICHAEL COURT  
CITY-ST-ZIP SILVER SPRING MD 20904

TITLE VD ☐ Delete  
NAME TROMBA, RAYMOND  
STREET ADDRESS 4162 LA SALLE LANE  
CITY-ST-ZIP PALM HARBOR FL 34685

TITLE VD ☐ Delete  
NAME STONER, KENNETH  
STREET ADDRESS 3400 GULF BLVD #206  
CITY-ST-ZIP BELLEAIR BEACH FL 33786

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

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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 exemptions contained in Section 119, 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:

*R.P. Springer* President 3-1-07  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #