2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 18, 2005 8:00 am
Secretary of State
02-18-2005 90068 005 ****61.25

DOCUMENT # 759967

1. Entity Name

LOVERS KEY BEACH CLUB CONDOMINIUM, INC.

Principal Place of Business	Mailing Address
8701 ESTERO BLVD FT MYERS FL 33931-5127	8701 ESTERO BLVD FT MYERS FL 33931-5127

1st MOORE CR2E037 (10/04)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc. Same	Suite, Apt. #, etc. Same
City & State Same	City & State
Zip Same / Country Same	Zip / Country

4. FEI Number 59-2447543 ☐ 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
PATRICK, CAROLYN CAM 8701 ESTERO BLVD FORT MYERS BEACH FL 33931	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 Carolyn Patrick CAROLYN PATRICK 2/15/05
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
Due By May 1, 2005

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BEEBE, JOHN C 10 KERINS TERRACE NEWPORT RI 02840-4024	☐ Delete	PD BEEBE, JOHN 10 KERINS TERR. NEWPORT RI 02840.	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD REDDY, DON 3590 ROUND BOTTOM ROAD CINCINNATI OH 45244	☒ Delete	VP LINDA FISHER 2247 OAKWAY DR. W. BLOOMFIELD. MI 48324	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP BEEBE, JOHN 10 KERINS TERRACE NEWPORT RI 02840	☐ Delete	SID THOMPSON 2433 MARCY LN. MINNETONKA. MN 55305	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD POLITTLE, PAUL 14610 CANAAN DR FORT MYERS FL 33908	☒ Delete	SUSAN MACKEY-KALLIS 11 HANOVER DR. W. CHESTER PA 19382	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD KALLIS, SUSAN-MACKEY 11 HANOVER DRIVE WEST CHESTER PA 19382	☐ Delete	BRENDA KURAT 8701 ESTERO BLVD #1206 FT. MYR BCH, FL 33931	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FISHER, LINDA 2247 OAKWAY DR WEST BLOOMFIELD MI 48324	☐ Delete	N/A	☐ Change ☐ Addition

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: Carolyn Patrick CAM CAROLYN PATRICK CAM 2/15/05 239-765-7973
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #