

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765248

FILED
Aug 02, 2008
Secretary of State

Entity Name: LOST KEY LANDING CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

14580 PERDIDO KEY DRIVE
PENSACOLA, FL 32507

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 34058
PENSACOLA, FL 325071058

New Mailing Address:

FEI Number: 59-2377065 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ROBINSON, KRISTINE
14590 PERDIDO KEY DR
B4
PENSACOLA, FL 32507 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: KRISTINE ROBINSON

08/02/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TREA () Delete
Name: JOHNSON, TIM
Address: 4642 US HWY 278 WEST
City-St-Zip: CULLMAN, AL 35057

Title: AT () Delete
Name: HORTON, GREG
Address: 32 DAVIS ROAD
City-St-Zip: TROY, MO 63379

Title: SD () Delete
Name: MCKLVEEN, JACK
Address: 822 HALLBROOK LN
City-St-Zip: ALPHARETTA, GA 30004

Title: VP () Delete
Name: ROBINSON, KRISTINE
Address: 13346 S. IRVING AVE.
City-St-Zip: BLUE ISLAND, IL 60406

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP () Change (X) Addition
Name: ARNOLD, KEVIN
Address: 1001 AVALON AVE
City-St-Zip: MUSCLE SHOALS, AL

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PRES (X) Change () Addition
Name: ROBINSON, KRISTINE
Address: 13346 S. IRVING AVE.
City-St-Zip: BLUE ISLAND, IL 60406

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: TIMOTHY JOHNSON

TREA

08/02/2008

Electronic Signature of Signing Officer or Director

Date