

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765525

FILED  
Apr 25, 2008  
Secretary of State

**Entity Name:** COLONY KEY HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

5444 PARK BLVD #101  
PINELLAS PARK, FL 33781 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O CMG PO BOX 47068  
ST. PETERSBURG, FL 33743 US

**New Mailing Address:**

C/O CMG PO BOX 60068  
ST. PETERSBURG, FL 33784 US

**FEI Number:** 59-2333600

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WELTON, RONALD D  
5444 PARK BLVD.  
PINELLAS PARK, FL 33781 US

**Name and Address of New Registered Agent:**

WELTON, RONALD D  
5444 PARK BLVD. #101  
PINELLAS PARK, FL 33781 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:

04/25/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: WALLING, KENT  
Address: 5114 BAYSHORE RD  
City-St-Zip: TAMPA, FL 33611

Title: VP ( ) Delete  
Name: FIELDS, LOUISE  
Address: 5109 ISLES VERRO CT  
City-St-Zip: TAMPA, FL 33611

Title: T ( ) Delete  
Name: PERKEY, KATHERINE  
Address: 5111 JULES VERNE CT.  
City-St-Zip: TAMPA, FL 33611

Title: S ( ) Delete  
Name: MURRAY, ROBERT  
Address: 2601 BALLA ST PT DR  
City-St-Zip: TAMPA, FL 33611

Title: D ( ) Delete  
Name: HILLSTER, ANITA  
Address: 5107 JULES VERNE CT  
City-St-Zip: TAMPA, FL 33611

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

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: KENT WALLING

PRES

04/25/2008

Electronic Signature of Signing Officer or Director

Date