


356

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2008 8:00 am
Secretary of State

03-11-2008 90019 029 ****61.25

DOCUMENT # N00000004424					
1. Entity Name REGENCY KEY HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business STERLING MGMT SVCS. 2870 SCHERER DR. N. STE 100 SAINT PETERSBURG, FL 33716			Mailing Address STERLING MGMT SVCS. 2870 SCHERER DR. N. STE 100 SAINT PETERSBURG, FL 33716		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-3671021	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
COTTERILL, RON 1010 N FLORIDA AVE TAMPA, FL 33602			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		FL
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	P	<input type="checkbox"/> Delete		TITLE	S
NAME	MORGAN, JEAN			NAME	ANN JUMPER
STREET ADDRESS	2407 LAKE WOODBERRY CIRCLE			STREET ADDRESS	3410 LAKE WOODBERRY CIRCLE
CITY-ST-ZIP	BRANDON, FL 33510			CITY-ST-ZIP	BRANDON, FL 33510
TITLE	V	<input checked="" type="checkbox"/> Delete		TITLE	
NAME	CHADWICK, DEBRA			NAME	
STREET ADDRESS	2405 LAKE WOODBERRY CIRCLE			STREET ADDRESS	
CITY-ST-ZIP	BRANDON, FL 33510			CITY-ST-ZIP	
TITLE	ST	<input checked="" type="checkbox"/> Delete		TITLE	T
NAME	SCOTT, ANITA			NAME	ANITA SCOTT
STREET ADDRESS	2223 LAKE WOODBERRY CIRCLE			STREET ADDRESS	2223 LAKE WOODBERRY CIRCLE
CITY-ST-ZIP	BRANDON, FL 33510			CITY-ST-ZIP	BRANDON, FL 33510
TITLE		<input type="checkbox"/> Delete		TITLE	
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY-ST-ZIP				CITY-ST-ZIP	
TITLE		<input type="checkbox"/> Delete		TITLE	
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY-ST-ZIP				CITY-ST-ZIP	
TITLE		<input type="checkbox"/> Delete		TITLE	
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY-ST-ZIP				CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Ann Jumper</u>			3-3-08		(813) 643-2977
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		Daytime Phone #

400320



01112008 Chg-NP CR2E037 (12/06)

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	
COTTERILL, RON 1010 N FLORIDA AVE TAMPA, FL 33602		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	FL

Filing Fee is \$61.25 Due by May 1, 2008

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		<input type="checkbox"/> Delete
TITLE	P	<input type="checkbox"/> Delete
NAME	MORGAN, JEAN	
STREET ADDRESS	2407 LAKE WOODBERRY CIRCLE	
CITY-ST-ZIP	BRANDON, FL 33510	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	CHADWICK, DEBRA	
STREET ADDRESS	2405 LAKE WOODBERRY CIRCLE	
CITY-ST-ZIP	BRANDON, FL 33510	
TITLE	ST	<input checked="" type="checkbox"/> Delete
NAME	SCOTT, ANITA	
STREET ADDRESS	2223 LAKE WOODBERRY CIRCLE	
CITY-ST-ZIP	BRANDON, FL 33510	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
TITLE	S	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	ANN JUMPER		
STREET ADDRESS	3410 LAKE WOODBERRY CIRCLE		
CITY-ST-ZIP	BRANDON, FL 33510		
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE	T	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	ANITA SCOTT		
STREET ADDRESS	2223 LAKE WOODBERRY CIRCLE		
CITY-ST-ZIP	BRANDON, FL 33510		
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

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SIGNATURE: Ann Jumper 3-3-08 (813) 643-2977

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #