

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2004 8:00 am
Secretary of State

03-24-2004 90044 020 ****61.50

DOCUMENT # N02000003231

1. Entity Name
**WINDLEY KEY MOBILE HOME PARK HOMEOWNERS'
ASSOCIATION, INC.**



Principal Place of Business
**84961 OLD HIGHWAY
BOX 22
ISLAMORADA, FL 33036**

Mailing Address
**5660 S. 36TH STREET
LAKE WORTH, FL 33463-4726**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03102004

Chg-NP

CR2E037 (10/03)

4. FEI Number
26-4502314

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

**CINTRON, ROBERT JR.
MORGAN & HENDRICK
317 WHITEHEAD STREET
KEY WEST, FL 33040**

Name
Nicholas W. MULICK, PA
Street Address (P.O. Box Number is Not Acceptable)
91645 Overseas Highway

City
Tavernier, FL Zip Code
33070

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]

3/11/04

Filing Fee is \$61.25
Due by May 1, 2004

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
PD
RYAN, JOHN D
5660 S. 36TH STREET
LAKE WORTH, FL 334634726 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
CLEMENT, EDMUND
84961 OLD HWY LOT 20
ISLAMORADA, FL 33036 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
Clement, Edmund
8245 N.W. 14th. Court
Coral Springs, FL 33071 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
KUENZLE, LIZ
84961 OLD HWY LOT 20
ISLAMORADA, FL 33036 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
Kuenzle, Liz
12390 Antille Drive
Boca Raton, FL 33428 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
KUENZLE, LIZ
84961 OLD HWY LOT 24
ISLAMORADA, FL 33036 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Christensen, Beverly
84961 Old Highway # 12
Islamorada, FL 33036 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
HUNTER, VIRGINIA
84961 OLD HWY LOT 19
ISLAMORADA, FL 33036 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Lutz, Judy
84961 Old Highway #11
Islamorada, FL 33036 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Strawser, Cecil
24 Albright Road
Kingwood, West Virginia 26537 ☐ 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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-12-04

Date

521-641-6497

Daytime Phone #