

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003231

FILED  
Apr 13, 2007  
Secretary of State

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

**Current Principal Place of Business:**

84961 OLD HIGHWAY  
BOX 2  
ISLAMORADA, FL 33036 US

**New Principal Place of Business:**

**Current Mailing Address:**

84961 OLD HIGHWAY  
BOX 2  
ISLAMORADA, FL 33036 US

**New Mailing Address:**

**FEI Number:** 26-4502314

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WRIGHT, THOMAS D  
9711 OVERSEAS HIGHWAY  
MARATHON, FL 33050 US

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

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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: FOSTER, DENNIS  
Address: 84961 OLD HIGHWAY #2  
City-St-Zip: ISLAMORADA, FL 33036

Title: VD ( ) Delete  
Name: BURKE, DIANE  
Address: 84961 OLD HIGHWAY #21  
City-St-Zip: ISLAMORADA, FL 33036

Title: TD ( ) Delete  
Name: KUENZLE, LIZ  
Address: 12390 ANTILLE DR.  
City-St-Zip: BOCA RATON, FL 33428

Title: TD ( ) Delete  
Name: CHRISTENSEN, BEVERLY  
Address: 84961 OLD HIGHWAY #12  
City-St-Zip: ISLAMORADA, FL 33036

Title: SD ( ) Delete  
Name: HUNTER, VIRGINIA  
Address: 84961 OLD HIGHWAY #19  
City-St-Zip: ISLAMORADA, FL 33036

Title: D ( ) Delete  
Name: LUTZ, JUDY  
Address: 84961 OLD HIGHWAY #11  
City-St-Zip: ISLAMORADA, FL 33036

**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:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: DENNIS FOSTER

PD

04/13/2007

Electronic Signature of Signing Officer or Director

Date