

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012748

FILED  
Apr 29, 2008  
Secretary of State

**Entity Name:** BOOT KEY SAILORS ASSOCIATION, INC.

**Current Principal Place of Business:**

800 35TH STREET OCEAN  
MARATHON, FL 33050

**New Principal Place of Business:**

**Current Mailing Address:**

800 35TH STREET OCEAN  
MARATHON, FL 33050

**New Mailing Address:**

**FEI Number:** 22-3918440

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RUSSELL, DAVID M  
800 35TH STREET OCEAN  
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: RUSSELL, DAVID  
Address: 800 35TH STREET OCEAN  
City-St-Zip: MARATHON, FL 33050

Title: VPD ( ) Delete  
Name: FINCH, GARY  
Address: 800 35TH STREET OCEAN  
City-St-Zip: MARATHON, FL 33050

Title: SD ( ) Delete  
Name: RUSSELL, ANDREA L  
Address: 800 35TH STREET OCEAN  
City-St-Zip: MARATHON, FL 33050

Title: T ( ) Delete  
Name: WITT, PATRICIA  
Address: P.O.BOX 500020  
City-St-Zip: MARATHON, FL 33050

**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:

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: DAVID RUSSELL

PD

04/29/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date