2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 31, 2009
Secretary of State

DOCUMENT# N08000002399

Entity Name: FLORIDA KEYS KITERIDERS ASSOCIATION, INC.

Current Principal Place of Business:

247 PUEBLO ST.
TAVERNIER, FL 33070

New Principal Place of Business:

179 OJIBWAY AVE
TAVERNIER, FL 33070

Current Mailing Address:

247 PUEBLO ST.
TAVERNIER, FL 33070

New Mailing Address:

179 OJIBWAY AVE.
TAVERNIER, FL 33070

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
1111 LINCOLN RD., STE. 400
MIAMI BEACH, FL 33139 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: P ( ) Delete
Name: BOSELY, THOMAS L.
Address: 247 PUEBLO ST.
City-St-Zip: TAVERNIER, FL 33070

Title: S ( ) Delete
Name: MASTRO, SHANA
Address: 247 PUEBLO ST.
City-St-Zip: TAVERNIER, FL 33070

Title: T ( ) Delete
Name: WALSH, MIKE
Address: 247 PUEBLO ST.
City-St-Zip: TAVERNIER, FL 33070

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: BOSELY, THOMAS L.
Address: 179 OJIBWAY AVE.
City-St-Zip: TAVERNIER, FL 33070

Title: S (X) Change ( ) Addition
Name: MASTRO, SHANA
Address: 179 OJIBWAY AVE.
City-St-Zip: TAVERNIER, FL 33070

Title: T (X) Change ( ) Addition
Name: WALSH, MIKE
Address: 179 OJIBWAY AVE.
City-St-Zip: TAVERNIER, FL 33070

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: THOMAS BOSELY P 08/31/2009

Electronic Signature of Signing Officer or Director — Date