

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010532

FILED
Apr 29, 2009
Secretary of State

Entity Name: LOST KEY MARINA & YACHT CLUB BOATING MEMBERSHIP ASSOCIATION, INC.

Current Principal Place of Business:

24301 WALDEN CENTRE DRIVE
BONITA SPRINGS, FL 34134

New Principal Place of Business:

Current Mailing Address:

24301 WALDEN CENTRE DRIVE
BONITA SPRINGS, FL 34134

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HASTINGS, VIVIEN
24301 WALDEN CENTRE DRIVE
BONITA SPRINGS, FL 34134 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: D () Delete
Name: PRICE, STEVEN
Address: 10045 SINTON DRIVE
City-St-Zip: PENSACOLA, FL 32507

Title: D () Delete
Name: JONES, GREG
Address: 10045 SINTON DRIVE
City-St-Zip: PENSACOLA, FL 32507

Title: D () Delete
Name: TIEBOUT-TOURON, MARCI
Address: 13587 PERDIDO KEY DRIVE
City-St-Zip: PENSACOLA, FL 32507

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DV (X) Change () Addition
Name: PRICE, STEVEN
Address: 625 LOST KEY DRIVE
City-St-Zip: PENSACOLA, FL 32507

Title: DP (X) Change () Addition
Name: JONES, GREG
Address: 625 LOST KEY DRIVE
City-St-Zip: PENSACOLA, FL 32507

Title: DST (X) Change () Addition
Name: TIEBOUT-TOURON, MARCI
Address: 24301 WALDEN CENTER DRIVE
City-St-Zip: BONITA SPRINGS, FL 34134

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: MARCI TIEBOUT-TOURON

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04/29/2009

Electronic Signature of Signing Officer or Director

Date