# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N20639

FILED Mar 26, 2008 Secretary of State

Entity Name: NORTH MANASOTA KEY ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

723 N. MANASOTA KEY RD ENGLEWOOD, FL 34223

**Current Mailing Address: New Mailing Address:** 

723 N. MANASOTA KEY RD ENGLEWOOD, FL 34223 US

FEI Number: 65-0557255 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BEEMAN, CHARLES A 723 N. MÁNASOTA KEY RD ENGLEWOOD, FL 34223

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:

Date

### Electronic Signature of Registered Agent

#### **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition MATSON, PETER BRANDT, DAVID Name: Name: 859 N MANASOTA KEY Address: 743 N MANASOTA KEY Address: ENGLEWOOD, FL 34223 City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip:

Title: Title: ( ) Delete () Change () Addition

COLMAR, JOYCE Name: Name: Address: 724A N MANASOTA KEY Address: City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip:

Title: () Delete Title: () Change () Addition

JEZERINAC, LYNN Name: Name: 719 N. MANASOTA KEY RD Address: Address: City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip:

( ) Delete Title: Title: () Change () Addition

Name: COOK, CICI Name: 747 MANASOTA KEY Address: Address: City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip:

VΡ Title: () Delete Title: VΡ (X) Change ( ) Addition

BRANDT, DAVID COYNE, WILLIAM Name: Name: 743 N MANASOTA KEY 770 N MANASOTA KEY Address: Address: City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: ENGLEWOOD, FL 34223

Title: () Delete Title: (X) Change ( ) Addition

COYNE, WILLIAM VERBLE, MICHAEL Name: Name: Address: 770 N MANASOTA KEY Address: 794 N MANASOTA KEY ENGLEWOOD, FL 34223 ENGLEWOOD, FL 34223 City-St-Zip: 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: LYNN JEZERINAC **TREA** 03/26/2008

Electronic Signature of Signing Officer or Director

Date