2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2009
Secretary of State

DOCUMENT# N25838

Entity Name: PORPOISE BEACH CLUB OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

28 JADE DRIVE
28 JADE DR., 1-8
KEY WEST, FL 330405624 US

New Principal Place of Business:

Current Mailing Address:

TONY WILLIS
2432 FLAGLER AVE
KEY WEST, FL 33040 US

New Mailing Address:

FEI Number: 65-0479419 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIS, TONY A TREAS
2432 FLAGLER AVE
KEY WEST, FL 33040 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:	S	( ) Delete
Name:	REINHARD, VIRGINIA	
Address:	5080 WHITTIER LANE	
City-St-Zip:	ROCKFORD, IL 61114	
Title:	T	( ) Delete
Name:	WILLIS, TONY A	
Address:	2432 FLAGLER AVE	
City-St-Zip:	KEY WEST, FL 33040	
Title:	PD	( ) Delete
Name:	BRADSHAW, DAVID	
Address:	28 JADE DRIVE #2	
City-St-Zip:	KEY WEST, FL 33040	
Title:	VP	( ) Delete
Name:	MCKERLEY, JAMES P	
Address:	28 JADE DR. #5	
City-St-Zip:	KEY WEST, FL 33040	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	S	(X) Change ( ) Addition
Name:	REINHARD, VIRGINIA	
Address:	28 JADE DRIVE #7	
City-St-Zip:	KEY WEST, FL 33040	
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: GAW TRES 04/17/2009

Electronic Signature of Signing Officer or Director — Date