

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 24, 2009  
Secretary of State**

DOCUMENT# N28395

Entity Name: KEY WEST VILLAGE HOMEOWNERS ASSOCIATION OF TEQUESTA, INC.

**Current Principal Place of Business:**

P O BOX 3116  
TEQUESTA, FL 33469 US

**New Principal Place of Business:**

108 INTRACOASTAL CIRCLE  
TEQUESTA, FL 33469 US

**Current Mailing Address:**

P O BOX 3116  
TEQUESTA, FL 33469 US

**New Mailing Address:**

FEI Number: 65-0136578      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

POSEY, HEATHER  
108 INTRACOSTAL CIR  
TEQUESTA, FL 33469 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: POSEY, HEATHER  
Address: 108 INTRACOASTAL CIR  
City-St-Zip: TEQUESTA, FL 33469

Title: S ( ) Delete  
Name: GENTILE, NANCY  
Address: 100 INTRACOASTAL CIR  
City-St-Zip: TEQUESTA, FL 33469

Title: V ( ) Delete  
Name: WILLIAMS, GEORGE  
Address: 121 INTRACOASTAL CIR  
City-St-Zip: TEQUESTA, FL 33469

Title: T ( ) Delete  
Name: CREWS, NANCY  
Address: 156 INTRACOASTAL CR.  
City-St-Zip: TEQUESTA, FL 33469

**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: HEATHER POSEY

P

03/24/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date