

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N33580

**FILED**  
**Apr 28, 2010**  
**Secretary of State**

**Entity Name:** BLUEWATER KEY RV OWNERSHIP PARK PROPERTY OWNERS ASSOCIATION INC.

**Current Principal Place of Business:**

2950 US HWY 1  
KEY WEST, FL 33040 US

**New Principal Place of Business:**

**Current Mailing Address:**

2950 US HWY 1  
KEY WEST, FL 33040 US

**New Mailing Address:**

**FEI Number:** 65-0163607

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCHWOBEL, CARL  
2950 US HIGHWAY 1  
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: P  
Name: SCHWOBEL, CARL  
Address: 2950 US HWY. 1  
City-St-Zip: KEY WEST, FL 33040

Title: VP  
Name: NAGEOTTE, DICK  
Address: 2950 US HWY 1  
City-St-Zip: KEY WEST, FL 33040

Title: T  
Name: HOLDER, VICTORIA  
Address: 2950 US HWY 1  
City-St-Zip: KEY WEST, FL 33020

Title: SD  
Name: LACROIX, RON  
Address: 2950 US HWY 1  
City-St-Zip: KEY WEST, FL 33040

Title: D  
Name: WABISKY, STAN  
Address: 2950 US HWY 1  
City-St-Zip: KEY WEST, FL 33040

Title: D  
Name: MAZUREK, JIM  
Address: 2950 US HWY 1  
City-St-Zip: KEY WEST, FL 33040

I hereby 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 all other like empowered.

SIGNATURE: CARL SCHWOBEL

PRES

04/28/2010

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

\_\_\_\_\_  
Date