

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37072

FILED  
Apr 06, 2010  
Secretary of State

**Entity Name:** KEYS GATE CONDOMINIUM NO. SEVEN ASSOCIATION, INC.

**Current Principal Place of Business:**

2233 SE 27TH DRIVE  
HOMESTEAD, FL 33035 US

**New Principal Place of Business:**

C/O LAKEVIEW MANAGEMENT, INC.  
13388 SW 128 STREET  
MIAMI, FL 33186 US

**Current Mailing Address:**

P.O. BOX 344445  
FLORIDA CITY, FL 33034 US

**New Mailing Address:**

C/O LAKEVIEW MANAGEMENT, INC.  
13388 SW 128 STREET  
MIAMI, FL 33186 US

FEI Number: 65-0186850      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SKRLD, INC.  
201 ALHAMBRA CIRCLE  
STE 1102  
CORAL GABLES, FL 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: PD  
Name: MORTON, ELIZABETH  
Address: 133 NE 2 AVENUE, #1519  
City-St-Zip: MIAMI, FL 33131

Title: VPD  
Name: QUILLY-MIRANDA, YOLANDA  
Address: 2261 SE 27TH DRIVE  
City-St-Zip: HOMESTEAD, FL 33035

Title: SD  
Name: MCGROTTY, JOAN  
Address: 2277 SE 27TH DRIVE  
City-St-Zip: HOMESTEAD, FL 33035

Title: TD  
Name: BARRETT, NANCY  
Address: 2260 SE 27TH DRIVE  
City-St-Zip: HOMESTEAD, FL 33035

Title: D  
Name: HOLMES, JAMES  
Address: 2267 SE 27TH DRIVE  
City-St-Zip: HOMESTEAD, FL 33035

Title: D  
Name: COPPOLA, MICHAEL  
Address: 2237 SE 27TH DRIVE  
City-St-Zip: HOMESTEAD, FL 33035

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: ELIZABETH MORTON

PD

04/06/2010

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

\_\_\_\_\_  
Date