

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 08, 2005 08:00 AM
Secretary of State

DOCUMENT # N37878

1. Entity Name
DUCK KEY WASTEWATER COOPERATIVE, INC.



Principal Place of Business
**HAWK'S CAY RESORT
61 HAWK'S CAY BLVD
DUCK KEY, FL 33050-3756 US**

Mailing Address
**HAWK'S CAY RESORT
61 HAWK'S CAY BLVD
DUCK KEY, FL 33050-3756 US**



03302005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0193040

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**WHITE, JOHN
61 HAWK'S CAY BLVD
SUITE 200
DUCK KEY, FL 33050**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PD
JOHNSON, DONALD H.
150 E. SAMPLE RD #200
POMPAHO BEACH, FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
WILSON, SANDRA
MILE MARKER 61
MARATHON, FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**STD
CHERNIAVSKY, THOMAS
MILL MARKER 61
MARATHON, FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

000000293338
04/08/05-80024-020 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Sandra W. Wilson **Sandra W. Wilson**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/4/05 (305) 289-2994
Date Daytime Phone #