

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 08, 2008 8:00 am
Secretary of State

05-08-2008 90014 007 ****61.25

DOCUMENT # N42130

1. Entity Name

LOWER KEYS PROPERTY OWNERS ASSOCIATION, INC.



Principal Place of Business

LOWER KEYS PROPERTY OWNERS ASSOC INC
1668 BOGIE DRIVE
BIG PINE KEY FL 33043
US

Mailing Address

P.O. BOX 430212
BIG PINE KEY FL 33043
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

59-2035632

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

YONKINGS, CHALRES
30884 MALAGA LANE
BIG PINE KEY FL 33043

7. Name and Address of New Registered Agent

Name

R. HEISER

Street Address (P.O. Box Number is Not Acceptable)

1680 HELEN ST

City

BIG PINE KEY,

FL

Zip Code

33043

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

R. Heiser

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

(NOTE: Registered Agent signature required when reinstating)

03/31/08

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	YONKINGS, CHARLES	
STREET ADDRESS	30884 MALAGA LANE	
CITY- ST- ZIP	BIG PINE KEY FL 33043	
TITLE	VD	<input type="checkbox"/> Delete
NAME	WAY, DON	
STREET ADDRESS	1817 WATSON BLVD	
CITY- ST- ZIP	BIG PINE KEY FL 33043	
TITLE	SD	<input type="checkbox"/> Delete
NAME	HEISER, DICK	
STREET ADDRESS	1680 HELEN ST.	
CITY- ST- ZIP	BIG PINE KEY FL 33043	
TITLE	T	<input type="checkbox"/> Delete
NAME	FORD, DERMA	
STREET ADDRESS	1653 FORD RD.	
CITY- ST- ZIP	BIG PINE KEY FL 33043	
TITLE	D	<input type="checkbox"/> Delete
NAME	HENCKEL, ROBERT	
STREET ADDRESS	31579 AVE E	
CITY- ST- ZIP	BIG PINE KEY FL 33043	
TITLE	D	<input type="checkbox"/> Delete
NAME	WARD, LINDA	
STREET ADDRESS	3704 POINCIANA ST	
CITY- ST- ZIP	BIG PINE KEY FL 33043	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *Erma Ford* ERMA FORD

4-21-08

305-872-9410