

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42130

FILED  
Feb 14, 2009  
Secretary of State

**Entity Name:** LOWER KEYS PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**Current Mailing Address:**

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

**New Mailing Address:**

**FEI Number:** 59-2035632

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HEISER, R  
1680 HELEN ST  
BIG PINE KEY, FL 33043 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: VD ( ) Delete  
Name: WAY, DON  
Address: 1817 WATSON BLVD  
City-St-Zip: BIG PINE KEY, FL 33043

Title: SD ( ) Delete  
Name: HEISER, DICK  
Address: 1680 HELEN ST.  
City-St-Zip: BIG PINE KEY, FL 33043

Title: T ( ) Delete  
Name: FORD, DERMA  
Address: 1653 FORD RD.  
City-St-Zip: BIG PINE KEY, FL 33043

Title: D ( ) Delete  
Name: HENCKEL, ROBERT  
Address: 31579 AVE E  
City-St-Zip: BIG PINE KEY, FL 33043

Title: D ( ) Delete  
Name: WARD, LINDA  
Address: 3704 POINCIANA ST  
City-St-Zip: BIG PINE KEY, FL 33043

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: FORD, ERMA  
Address: 1653 FORD RD.  
City-St-Zip: BIG PINE KEY, FL 33043

Title: D (X) Change ( ) Addition  
Name: HAWKINS, DICK  
Address: 1055 AVE C  
City-St-Zip: BIG PINE KEY, FL 33043

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: RICHARD HEISER

PRES

02/14/2009

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

\_\_\_\_\_  
Date