2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2009
Secretary of State

DOCUMENT# N92000000021

Entity Name: RYE KEY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

11901 RYE KEY DR
CEDAR KEY, FL 32625 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 586
CEDAR KEY, FL 32625 US

New Mailing Address:

FEI Number: 59-3184498 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STONE, MARY
11901 RYE KEY DR
CEDAR KEY, FL 32625 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: D ( ) Delete
Name: SEYFERT, LINDA
Address: 12602 SR 24
City-St-Zip: CEDAR KEY, FL 32625

Title: PD ( ) Delete
Name: VIELE, RICHARD
Address: 11851 OSPREY WAY
City-St-Zip: CEDAR KEY, FL 33625

Title: D ( ) Delete
Name: DRAKE, JUDITH
Address: 11910 RYE KEY DRIVE
City-St-Zip: CEDAR KEY, FL 32625

Title: STD ( ) Delete
Name: REYNOLDS, CHRISTOPHER
Address: 12602 SR 24
City-St-Zip: CEDAR KEY, FL 32625

Title: VD ( ) Delete
Name: FERRENCE, JEFFREY
Address: 12716 N.E. 109TH LANE
City-St-Zip: ALACHUA, FL 32615

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: CHRISTOPHER REYNOLDS STD 01/19/2009
Electronic Signature of Signing Officer or Director — Date