

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2008 8:00 am
Secretary of State

01-09-2008 90010 010 ****61.25

DOCUMENT # N93000005673

1. Entity Name
MIDDLE KEYS MARINE ASSOCIATION, INC.



Principal Place of Business
**700 39TH ST., OCEAN
MARATHON, FL 33050**

Mailing Address
**PO BOX 501806
MARATHON, FL 33050-1806 US**

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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MARATHON, FL

City & State

Zip

33050

Country

MON ROE

Zip

Country

01052008 Chg-NP CR2E037 (12/06)

4. FEI Number
65-0450581

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MILLER, ROBERT K
2975 OVERSEAS HWY
MARATHON, FL 33050**

Name

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

City

FL

Zip Code

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, 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PD
GAHAGAN, LARRY
2055 OVERSEAS HWY
MARATHON, FL 33050** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PRESIDENT
ERIC MYRMEL
2601 OVERSEAS HWY
MARATHON, FL 33050** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VD
GONZALEZ, NEIL
700 39TH STREET, GULF
MARATHON, FL 33050** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VICE PRESIDENT
CHRIS BOYLE
35 SOMBRERO RD
MARATHON, FL 33050** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**TD
FOLEY, DAVID
383 LIME AVENUE
MARATHON, FL 33050** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
STIGLITZ, JOHN
1230 OVERSEAS HWY.
MARATHON, FL 33050** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**SD
GONZALEZ, CHRISTINA
700 39TH ST, GULF
MARATHON, FL 33050** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**JANA CARTER
2994 OVERSEAS HWY
MARATHON, FL 33050
(SECRETARY)** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
BLOOMFIELD, RON
4681 OVERSEAS HWY
MARATHON, FL 33050** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DIRECTOR
NEIL GONZALEZ
700 39TH ST, GULF
MARATHON, FL 33050** ☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report of 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAVID A. FOLEY

1-7-2008

305-743-3568

Date

Daytime Phone #

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

ATTACHMENT

| | | | | | |
|---|------------------------------------|---------------------------------|--|--|---|
| DOCUMENT # N93000005673 | | | | | |
| 1. Entity Name MIDDLE KEYS MARINE ASSOCIATION, INC. | | | | | |
| Principal Place of Business 700 39TH ST., OCEAN MARATHON, FL 33050 | | | Mailing Address PO BOX 501806 MARATHON, FL 33050-1806 US | | |
| 2. Principal Place of Business - No P.O. Box # | | 3. Mailing Address | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | |
| City & State | | City & State | | 01052008 Chg-NP CR2E037 (12/06) | |
| Zip | Country | Zip | Country | 4. FEI Number 65-0450581 | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | | | \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent | | | | 7. Name and Address of New Registered Agent | |
| MILLER, ROBERT K 2975 OVERSEAS HWY MARATHON, FL 33050 | | | | Name | |
| | | | | Street Address (P.O. Box Number is Not Acceptable) | |
| | | | | City | |
| | | | | FL Zip Code | |
| 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 _____ <i>NOTE: ADDITIONAL DIRECTOR</i> _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> | | | | | |
| Filing Fee is \$61.25 Due by May 1, 2008 | | | 9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees <input checked="" type="checkbox"/> Make check payable to Florida Department of State | | |
| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | | |
| TITLE PD | NAME GAHAGAN, LARRY | <input type="checkbox"/> Delete | TITLE DIRECTOR | NAME TDM COOKE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| STREET ADDRESS 2055 OVERSEAS HWY | MARATHON, FL 33050 | | STREET ADDRESS 3988 OVERSEAS HWY | MARATHON, FL 33050 | |
| CITY - ST - ZIP | MARATHON, FL 33050 | | CITY - ST - ZIP | MARATHON, FL 33050 | |
| TITLE VD | NAME GONZALEZ, NEIL | <input type="checkbox"/> Delete | TITLE | NAME | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| STREET ADDRESS 700 39TH STREET, GULF | MARATHON, FL 33050 | | STREET ADDRESS | | |
| CITY - ST - ZIP | MARATHON, FL 33050 | | CITY - ST - ZIP | | |
| TITLE TD | NAME FOLEY, DAVID | <input type="checkbox"/> Delete | TITLE | NAME | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| STREET ADDRESS 383 LIME AVENUE | MARATHON, FL 33050 | | STREET ADDRESS | | |
| CITY - ST - ZIP | MARATHON, FL 33050 | | CITY - ST - ZIP | | |
| TITLE D | NAME STIGLITZ, JOHN | <input type="checkbox"/> Delete | TITLE | NAME | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| STREET ADDRESS 1230 OVERSEAS HWY. | MARATHON, FL 33050 | | STREET ADDRESS | | |
| CITY - ST - ZIP | MARATHON, FL 33050 | | CITY - ST - ZIP | | |
| TITLE SD | NAME GONZALEZ, CHRISTINA | <input type="checkbox"/> Delete | TITLE | NAME | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| STREET ADDRESS 700 39TH ST, GULF | MARATHON, FL 33050 | | STREET ADDRESS | | |
| CITY - ST - ZIP | MARATHON, FL 33050 | | CITY - ST - ZIP | | |
| TITLE D | NAME BLOOMFIELD, RON | <input type="checkbox"/> Delete | TITLE | NAME | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| STREET ADDRESS 4681 OVERSEAS HWY | MARATHON, FL 33050 | | STREET ADDRESS | | |
| CITY - ST - ZIP | MARATHON, FL 33050 | | CITY - ST - ZIP | | |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____ | | | | | |
| <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | | | | | |
| <small>Date</small> | | | | | |
| <small>Daytime Phone #</small> | | | | | |