

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003626

FILED
Jan 26, 2011
Secretary of State

Entity Name: THE MOORINGS OF SAND KEY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

11350 66TH ST. N.
SUITE 124
LARGO, FL 33773 US

New Principal Place of Business:

Current Mailing Address:

11350 66TH ST. N.
SUITE 124
LARGO, FL 33773 US

New Mailing Address:

FEI Number: 59-3270255

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLIDAY ISLES PROPERTY MGMT., INC.
C/O ROBERT BABCOCK
11350 66TH ST. N., STE 124
LARGO, FL 33773 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: PD
Name: MENNEN, GERRY
Address: 174 SAND KEY ESTATES DR
City-St-Zip: CLEARWATER, FL 33767

Title: D
Name: EAGLE, PHYLLIS
Address: 142 SAND KEY ESTATES DR
City-St-Zip: CLEARWATER, FL 33767

Title: TD
Name: FRANCOISE, RONALD
Address: 158 SAND KEY ESTATES DR.
City-St-Zip: CLEARWATER, FL 33767

Title: VPD
Name: VALLARI, BARBARA
Address: 1636 SAND KEY ESTATES CT
City-St-Zip: CLEARWATER, FL 33767

Title: D
Name: THACKER, BARBARA
Address: 154 SAND KEY ESTATES DR
City-St-Zip: CLEARWATER BEACH, FL 33767

Title: SD
Name: GROSS, PAT
Address: 1613 SAND KEY ESTATES CT
City-St-Zip: CLEARWATER BEACH, FL 33767

I hereby 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 all other like empowered.

SIGNATURE: GERRY MENNEN

P

01/26/2011

Electronic Signature of Signing Officer or Director

Date