

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001410

FILED
Apr 30, 2008
Secretary of State

Entity Name: UPPER KEYS COMMUNITY POOL, INC.

Current Principal Place of Business:

320 LAGUNA AVE.
KEY LARGO, FL 33037 US

New Principal Place of Business:

Current Mailing Address:

320 LAGUNA AVE.
KEY LARGO, FL 33037 US

New Mailing Address:

FEI Number: 65-0760704

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GESSEL, PATRICIA
99530 OVERSEAS HWY, #2
KEY LARGO, FL 33037 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: FITZPATRICK, DENNIS J
Address: 36 S. BOUNTY LANE
City-St-Zip: KEY LARGO, FL 33037

Title: D () Delete
Name: O'CONNOR, KATHLEEN
Address: 44 MARINA AVE.
City-St-Zip: KEY LARGO, FL 33037

Title: D () Delete
Name: GESSEL, PATRICIA
Address: 99530 OVERSEAS HWY #2
City-St-Zip: KEY LARGO, FL 33037

Title: D () Delete
Name: WAGNER, KURT
Address: 71 MUTINY
City-St-Zip: KEY LARGO, FL 33037

Title: D () Delete
Name: FIRM, TODD
Address: 99626 OVERSEAS HWY #1
City-St-Zip: KEY LARGO, FL 33037

Title: D () Delete
Name: BOILINI, JIM
Address: 99696 OVERSEAS HWY
City-St-Zip: KEY LARGO, FL 33037

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:

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: PATRICIA GESSEL

D

04/30/2008

Electronic Signature of Signing Officer or Director

Date