2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001587

Entity Name: PEN KEY CLUB, INC.

FILED Jun 25, 2009 Secretary of State

M.M. 83.1 OVERSEAS HIGHWAY ISLAMORADA, FL 33036

Current Mailing Address: New Mailing Address:

P.O. BOX 1089 P.O. BOX 1040

ISLAMORADA, FL 33036 TAVERNIER, FL 33070

FEI Number: 59-0855006 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

PRUETT, DAREL MCDONALD, THOMAS R 153 SUNSET GARDENS DR 36 PEN KEY CLUB 83200 OVERSEAS HWY TAVERNIER, FL 33070 ISLAMORADA, FL 33036 US

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: THOMAS R MCDONALD 06/25/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

PRUETT, DAREL M.D. SGROI, CARLO Name: Name:

Address: P.O. BOX 763 Address: PO BOX 118 ISLAMORADA, FL 33036

City-St-Zip: City-St-Zip: ISLAMORADA, FL 33036

Title: (X) Delete Title: () Change () Addition

Name: SGROI, CARLO Name: Address: 20 PEN KEY CLUB Address: City-St-Zip: ISLAMORADA, FL 33036 City-St-Zip:

Title: () Delete Title: () Change () Addition

RODGERS, RODDY Name: Name: 83200 OVERSEAS HWY Address: Address: City-St-Zip: ISLAMORADA, FL 33036 City-St-Zip:

() Delete Title: Title: () Change () Addition

Name: JACOBSON, JAY Name: Address: 222 NE 8TH AVE Address: City-St-Zip: DELRAY BEACH, FL 33483 City-St-Zip:

Title: Title: () Delete () Change () Addition

PROWITT, PETER Name: Name: 3749 NORTH TAZEWELL ST Address: Address: City-St-Zip: ARLINGTON, VA 22209 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: CARLO SGROI **TREA** 06/25/2009