2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2008
Secretary of State

DOCUMENT# N98000005857

Entity Name: LEEWARD KEY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2936 SCENIC GULF DRIVE
DESTIN, FL 32550 US

New Principal Place of Business:

2936 SCENIC GULF DRIVE
MIRAMAR BEACH, FL 32550 US

Current Mailing Address:

2936 SCENIC GULF DRIVE
MIRAMAR BEACH, FL 32550 US

New Mailing Address:

FEI Number: 59-3638287 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ARNOLD, E. THOMAS
2936 SCENIC GULF DRIVE
MIRAMAR BEACH, FL 32550 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 ( ) Delete
Name: ARNOLD, E. THOMAS
Address: 5151 PFEIFFER ROAD, SUITE 100
City-St-Zip: CINCINNATI, OH 45242

Title: VPD ( ) Delete
Name: WILSON, RICHARD
Address: 2390 WESTPORT CIRCLE
City-St-Zip: MARIETTA, GA 30064

Title: STD ( ) Delete
Name: ODOM, DAVID I
Address: 310 PARKSIDE DR.
City-St-Zip: SIMPSONVILLE, SC 29681

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change ( ) Addition
Name: ODOM, DAVID I
Address: 310 PARKSIDE DR.
City-St-Zip: SIMPSONVILLE, SC 29681

Title: SD ( ) Change (X) Addition
Name: FRYE, RHETT
Address: 675 SOCIETY STREET
City-St-Zip: ALPHARETTA, GA 30022

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: E. THOMAS ARNOLD PRES 01/07/2008
Electronic Signature of Signing Officer or Director — Date