2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2009
Secretary of State

DOCUMENT# N99000000809

Entity Name: KEY COVE HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

3029 NORTH ROOSEVELT BOULEVARD
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

C/O ICAMCO, INC.
402 APPELROUTH LANE, #2-G
KEY WEST, FL 33040

New Mailing Address:

C/O ICAMCO, INC.
3424 DUCK AVE
KEY WEST, FL 33040

FEI Number: 65-1109370 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BATTY, PETER E
402 APPELROUTH LANE
SUITE 2-G
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

BATTY, PETER E
3424 DUCK AVE
KEY WEST, FL 33040 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: PETER E BATTY 02/13/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: REAGAN, JEFFREY
Address: 3029 N ROOSEVELT BLVD, #25
City-St-Zip: KEY WEST, FL 33040

Title: VP ( ) Delete
Name: BODMER, SCARLET
Address: 3029 N ROOSEVELT BLVD, # 38
City-St-Zip: KEY WEST, FL 33040

Title: T ( ) Delete
Name: GUERRY, EDWARD
Address: 3029 N. ROOSEVELT BLVD., #35
City-St-Zip: KEY WEST, FL 33040

Title: S ( ) Delete
Name: FLEITA, SONJA
Address: 3029 N ROOSEVELT BLVD, # 49
City-St-Zip: KEY WEST, FL 33040

Title: D ( ) Delete
Name: ROME, RANDY
Address: 3029 N ROOSEVELT BLVD, # 18
City-St-Zip: KEY WEST, FL 33040

Title: D ( ) Delete
Name: CASAS, MARION H
Address: 3029 N. ROOSEVELT BLVD., #40
City-St-Zip: KEY WEST, FL 33040

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change ( ) Addition
Name: SCARBROUGH, GAVIN
Address: 3029 N. ROOSEVELT BLVD., #53
City-St-Zip: KEY WEST, FL 33040

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: PETER E BATTY MGR 02/13/2009
Electronic Signature of Signing Officer or Director — Date