

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000070175

Entity Name: WAKULLA KEY LARGO, INC.

**FILED**  
**Feb 17, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

92 CYPRESS BREEZE  
SANTA ROSA BEACH, FL 32459

## **New Principal Place of Business:**

755 GRAND BLVD  
STE. B 105-235  
DESTIN, FL 32550

## **Current Mailing Address:**

92 CYPRESS BREEZE  
SANTA ROSA BEACH, FL 32459

## **New Mailing Address:**

401 WESTPARK COURT  
STE. 200  
PEACHTREE CITY, GA 30269

FEI Number: 27-3566749

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

NRAI SERVICES, INC.  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 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  
Name: SCHLOSSER, BROOKE M  
Address: 755 GRAND BLVD, STE. B 105-235  
City-St-Zip: DESTIN, FL 32550 US

Title: CFO  
Name: ALDRIDGE, CINDY D  
Address: 755 GRAND BLVD, STE. B 105-235  
City-St-Zip: DESTIN, FL 32550 US

Title: P  
Name: ALDRIDGE, CINDY D  
Address: 755 GRAND BLVD., STE. B 105-235  
City-St-Zip: DESTIN, FL 32550

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CINDY ALDRIDGE

P

02/17/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date