

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V10615

Entity Name: I.L.E. KEY CLUB, INC.

FILED
Jan 16, 2009
Secretary of State

Current Principal Place of Business:

6 B. FT. MYERS DR.
INDIAN LAKE ESTATES, FL 33855 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 7806
INDIAN LAKE ESTATES, FL 33855 US

New Mailing Address:

FEI Number: 59-3106070

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRACKETT, ROGER
2350 ALLAMANDA
INDIAN LAKE ESTATES, FL 33855 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MORRISON, GLENN
Address: 6660 CR 630 E.
City-St-Zip: FROSTPROOF, FL 33843

Title: V () Delete
Name: HENRICH, MARVIN
Address: 2140 ALLAMDA DR
City-St-Zip: INDIAN LAK ESTATES, FL 33855

Title: TD () Delete
Name: BRACKETT, ROGER
Address: 2350 ALLAMANDA
City-St-Zip: INDIAN LAKES ESTATES, FL 33855

Title: S () Delete
Name: SCHULTZ, LARRY
Address: 6280 AVACADO DR
City-St-Zip: INDIAN LAKE ESTATES, FL 33855

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TVAROHA, SAM
Address: 4391 HIBISCUS DR.
City-St-Zip: INDIAN LAKE EST., FL 33855

Title: V (X) Change () Addition
Name: MILLER, ROBERT
Address: 4560 GAILARDIA DR.
City-St-Zip: INDIAN LAK ESTATES, FL 33855

Title: TD (X) Change () Addition
Name: BRACKETT, ROGER
Address: 2350 ALLAMANDA DR.
City-St-Zip: INDIAN LAKES ESTATES, FL 33855

Title: S (X) Change () Addition
Name: GUILD, LAWRENCE
Address: 3810 INDIAN LAKE DR.
City-St-Zip: INDIAN LAKE ESTATES, FL 33855

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

SIGNATURE: ROGER BRACKETT

TD

01/16/2009

Electronic Signature of Signing Officer or Director

Date