

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 700165

**FILED**  
**Mar 11, 2016**  
**Secretary of State**  
**CC6555757965**

**Entity Name:** BIRD KEY HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

100 BIRD KEY DRIVE  
SARASOTA, FL 34236

**Current Mailing Address:**

100 BIRD KEY DRIVE  
SARASOTA, FL 34236

**FEI Number:** 59-0952687

**Certificate of Status Desired:** No

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

LLOYD, WILLIAM  
100 BIRD KEY DRIVE  
SARASOTA, FL 34236 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:** WILLIAM LLOYD

03/11/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            LLOYD, WILLIAM  
Address        100 BIRD KEY DRIVE  
City-State-Zip: SARASOTA FL 34236

Title            DIRECTOR  
Name            BELLANTONI, JOHN  
Address        100 BIRD KEY DRIVE  
City-State-Zip: SARASOTA FL 34236

Title            TREASURER  
Name            HUNTER, MICHAEL  
Address        100 BIRD KEY DRIVE  
City-State-Zip: SARASOTA FL 34236

Title            SECRETARY  
Name            ROBLE, ROSANNE  
Address        100 BIRD KEY DRIVE  
City-State-Zip: SARASOTA FL 34236

Title            DIRECTOR  
Name            JACKSON, JEFF  
Address        100 BIRD KEY DRIVE  
City-State-Zip: SARASOTA FL 34236

Title            DIRECTOR  
Name            LAWRENCE, LEWIS  
Address        100 BIRD KEY DRIVE  
City-State-Zip: SARASOTA FL 34236

Title            DIRECTOR  
Name            MOHL, ANNE  
Address        100 BIRD KEY DR  
City-State-Zip: SARASOTA FL 34236

Title            VP  
Name            HECKENBERG, BRUCE  
Address        100 BIRD KEY DRIVE  
City-State-Zip: SARASOTA FL 34236

**Continues on page 2**

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

**SIGNATURE:** WILLIAM LLOYD

RA

03/11/2016

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name SHANTZ, CHRISTINA  
Address 100 BIRD KEY DRIVE  
City-State-Zip: SARASOTA FL 34236

Title DIRECTOR  
Name ZEIGLER, MARTHA  
Address 100 BIRD KEY DRIVE  
City-State-Zip: SARASOTA FL 34236

Title DIRECTOR  
Name TURNER, HELEN  
Address 100 BIRD KEY DRIVE  
City-State-Zip: SARASOTA FL 34236