

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005436

FILED  
Feb 16, 2012  
Secretary of State

Entity Name: ROTARY CLUB OF KEY WEST, FLORIDA, INC.

**Current Principal Place of Business:**

819 PEACOCK PLAZA  
#118  
KEY WEST, FL 33040

**New Principal Place of Business:**

**Current Mailing Address:**

819 PEACOCK PLAZA  
#118  
KEY WEST, FL 33040

**New Mailing Address:**

FEI Number: 59-6152300      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

LONG, JANICE  
819 PEACOCK PLAZA  
#118  
KEY WEST, FL 33040 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: T  
Name: ELIZABETH, MACLAUGHLIN  
Address: P.O. BOX 469  
City-St-Zip: KEY WEST, FL 33040

Title: PP  
Name: MOLINET, RUDY  
Address: P.O. BOX 469  
City-St-Zip: KEY WEST, FL 33040

Title: P  
Name: PETRO, MIKE  
Address: P.O. BOX 469  
City-St-Zip: KEY WEST, FL 33040

Title: PE  
Name: BARROSO, BRIAN  
Address: P O BOX 469  
City-St-Zip: KEY WEST, FL 33041

Title: SEC  
Name: HERRADA, FRANK  
Address: P O BOX 469  
City-St-Zip: KEY WEST, FL 33041

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: JANICE LONG

AGEN

02/16/2012

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

\_\_\_\_\_  
Date