2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# N07000009556

Entity Name: ANNE MCKEE ARTISTS FUND OF THE FLORIDA KEYS, INC.

Current Principal Place of Business:

1506 SOUTH ST.
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

1506 SOUTH ST.
KEY WEST, FL 33040

New Mailing Address:

FEI Number: 26-1259311 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TAUSCHE, MELISSA
1506 SOUTH ST.
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: DP ( ) Delete
Name: TAUSCHE, MELISSA
Address: 1506 SOUTH ST.
City-St-Zip: KEY WEST, FL 33040

Title: DS ( ) Delete
Name: LINDER, RITA
Address: 1216 PETRONIA ST
City-St-Zip: KEY WEST, FL 33040

Title: DV ( ) Delete
Name: CURTIS, LIBBY
Address: 3446 RIVIERA DR.
City-St-Zip: KEY WEST, FL 33040

Title: DT ( ) Delete
Name: MILLER CAREY, JOAN G
Address: 19509 TEQUESTA ST.
City-St-Zip: SUMMERLAND KEY, FL 33042

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: CURTIS, LIBBY
Address: 3446 RIVIERA DR.
City-St-Zip: KEY WEST, FL 33040

Title: DV (X) Change ( ) Addition
Name: LINDER, RITA
Address: 1216 PETRONIA ST
City-St-Zip: KEY WEST, FL 33040

Title: DS (X) Change ( ) Addition
Name: RIVAS, JOANNE
Address: 3202 RIVIERA DR.
City-St-Zip: KEY WEST, FL 33040

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: JOAN MILLER CAREY DT 04/29/2009

Electronic Signature of Signing Officer or Director — Date