

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36293

FILED
Apr 29, 2008
Secretary of State

Entity Name: FLORIDA KEYS AREA HEALTH EDUCATION CENTER, INC.

Current Principal Place of Business:

5800 OVERSEAS HIGHWAY
SUITE #38
MARATHON, FL 33050 US

New Principal Place of Business:

Current Mailing Address:

5800 OVERSEAS HIGHWAY
SUITE #38
MARATHON, FL 33050 US

New Mailing Address:

FEI Number: 65-0183810 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YANKOW, NANCY
88101 OVERSEAS HIGHWAY
ISLAMORADA, FL 33036 US

Name and Address of New Registered Agent:

GREENMAN, FRANKLIN
5800 OVERSEAS HWY
SUITE # 40
MARATHON, FL 33050 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: FRANKLIN GREENMAN 04/29/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MIRANDA BAKER, JILL
Address: 91500 OVERSEAS HIGHWAY
City-St-Zip: TAVERNIER, FL 33070

Title: VD () Delete
Name: BASSETT, KIM
Address: 3301 OVERSEAS HWY
City-St-Zip: MARATHON, FL 33050

Title: SD () Delete
Name: HENRIQUEZ, MICHAEL
Address: 241 TRUMBO ROAD
City-St-Zip: KEY WEST, FL 33040

Title: TD () Delete
Name: DEMOSS, MARLO
Address: 164 JASMINE STREET
City-St-Zip: TAVERNIER, FL 33070

Title: D () Delete
Name: MICHAEL, CUNNINGHAM
Address: 5800OVERSEAS HIGHWAY, STE #38
City-St-Zip: MARATHON, FL 33050

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MICHAEL CUNNINGHAM D 04/29/2008

Electronic Signature of Signing Officer or Director Date