

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36293

FILED
Apr 27, 2012
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:

GREENMAN, FRANKLIN
5800 OVERSEAS HWY
SUITE # 40
MARATHON, FL 33050 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: PD
Name: DEMOSS, MARLO
Address: 164 JASMINE STREET
City-St-Zip: TAVERNIER, FL 33070

Title: VD
Name: MERRILL RASCHEIN, HOLLY
Address: 714 BARCELONA ROAD
City-St-Zip: KEY LARGO, FL 33037

Title: SD
Name: TONER, IRENE
Address: 243 BUTTONWOOD DRIVE
City-St-Zip: KEY LARGO, FL 33037

Title: TD
Name: WALKER, ROBERT
Address: 1218 16TH TERRACE
City-St-Zip: KEY WEST, FL 33040

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

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: MICHAEL CUNNINGHAM

D

04/27/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date