## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N46258

FILED Feb 12, 2008 Secretary of State

Entity Name: ROTARY CLUB OF KEY LARGO, INC.

Current Principal Place of Business:			New Prince	New Principal Place of Business:	
	ERSEAS HWY 30, FL 33037				
Current Mailing Address:			New Maili	New Mailing Address:	
P.O. BOX : KEY LARG	252 60, FL 33037				
FEI Number:	: 65-0298310	FEI Number Applied For()	FEI Number Not Appl	licable ( ) Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
	MARCIA ERSEAS HWY ER, FL 33070	US			
	named entity see of Florida.	submits this statement for the p	ourpose of changing i	ts registered office or registered agent, or both,	
SIGNATUR	RE:				
	Electron	ic Signature of Registered Age	ent	Date	
OFFICERS	S AND DIREC	TORS:	ADDITION	IS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	DIR () ANDERSON, W 99198 OVERSE KEY LARGO, F	EAS HWY, #7	Title: Name: Address: City-St-Zip:	DIR (X) Change ( ) Addition ANDERSON, WILLIAM A. 99330 OVERSEAS HWY KEY LARGO, FL 33037	
Title: Name: Address: City-St-Zip:	PP () NEWBERRY, S 91605 OVERSE TAVERNIER, FI	EAS HWY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () BEATY, CRIS 91605 OVERSE TAVERNIER, FI		Title: Name: Address: City-St-Zip:	()Change()Addition	
Title: Name: Address: City-St-Zip:	S () STUART, JOHN 91605 S. OVER TAVERNIER, FI	SEAS HWY	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DIR () MCAFEE, DEBO 103400 OVERS KEY LARGO, F	EAS HWY	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	PE () RECARY, SUSA 215 ANNE BON KEY LARGO, F	NY DR	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: CRIS BEATY T 02/12/2008