

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000776

FILED  
May 06, 2009  
Secretary of State

**Entity Name:** BOYS & GIRLS CLUBS OF THE KEYS AREA, INC.

**Current Principal Place of Business:**

1400 UNITED ST  
SUITE 108  
KEY WEST, FL 33040 US

**New Principal Place of Business:**

**Current Mailing Address:**

1400 UNITED ST  
SUITE 108  
KEY WEST, FL 33040 US

**New Mailing Address:**

1400 UNITED ST  
SUITE 108  
KEY WEST, FL 33040 US

**FEI Number:** 65-0678071 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

DOMBROSKI, DANIEL R  
29135 CAMELLIA LANE  
BIG PINE KEY, FL 33043 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: PRES ( ) Delete  
Name: MANNY, MADRUGA  
Address: PO BOX 4271  
City-St-Zip: KEY WEST, FL 33041 US

Title: VP ( ) Delete  
Name: BETH, GROOMS  
Address: 1415 THOMPSON STREET  
City-St-Zip: KEY WEST, FL 33040 US

Title: TR ( ) Delete  
Name: JOHN, DICK  
Address: 58346 OVERSEAS HIGHWAY  
City-St-Zip: MARATHON, FL 33050 US

Title: SEC ( ) Delete  
Name: DUNCAN, MATTHEWSON  
Address: 28509 JOLLY ROGER DRIVE  
City-St-Zip: LITTLE TORCH, FL 33042 US

**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:

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: DANIEL R. DOMBROSKI

CPO

05/06/2009

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

\_\_\_\_\_  
Date