

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000010433

FILED
Mar 08, 2011
Secretary of State

Entity Name: KEY WEST WILD BIRD CENTER, INC.

Current Principal Place of Business:

1801 WHITE STREET
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2297
KEY WEST, FL 33045

New Mailing Address:

FEI Number: 27-1565877

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, MICHELLE
22941 BLACK BEARD LANE
SUMMERLAND KEY, FL 33042 US

Name and Address of New Registered Agent:

SWEETS, TOM
4 ROBERTA
KEY WEST, FL 33040 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: TOM SWEETS

03/08/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP
Name: SWEETS, TOM
Address: 4 ROBERTA
City-St-Zip: KEY WEST, FL 33040

Title: DV
Name: MICHELLE, ANDERSON
Address: 22941 BLACK BEARD LANE
City-St-Zip: SUMMERLAND KEY, FL 33042

Title: S
Name: BRITTIN, DEBRA
Address: 21 ALLAMANDA TERRACE
City-St-Zip: KEY WEST, FL 33040

Title: D
Name: WESTBROOK, ELLEN
Address: 2924 FOGARTY AVE
City-St-Zip: KEY WEST, FL 33040

Title: D
Name: GOODWIN, SARAH
Address: 2404 SEIDENBURG AVE
City-St-Zip: KEY WEST, FL 33040

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: TOM SWEETS

DP

03/08/2011

Electronic Signature of Signing Officer or Director

Date