

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755880

Entity Name: KEY WEST PLAYERS, INC.

Current Principal Place of Business:

407 WALL ST
WATERFRONT PLAYHOUSE
KEY WEST, FL 33040

Current Mailing Address:

P.O. BOX 724
KEY WEST, FL 33041

FEI Number: 59-1966652

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCOTT, LENA
1107 KEY PLAZA
414
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: LENA SCOTT

01/18/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name ELWELL, CHRISTOPHER
Address P.O. BOX 724
City-State-Zip: KEY WEST FL 33041

Title DIRECTOR
Name KAUFMAN, STUART
Address P.O. BOX 724
City-State-Zip: KEY WEST FL 33041

Title DIRECTOR
Name FRECHETTE, ROBERT
Address P.O. BOX 724
City-State-Zip: KEY WEST FL 33041

Title DIRECTOR
Name FRECHETTE, LYNDA
Address P.O. BOX 724
City-State-Zip: KEY WEST FL 33041

Title DIRECTOR
Name PRICE, MARY-LYNNE
Address P.O. BOX 724
City-State-Zip: KEY WEST FL 33041

Title DIRECTOR
Name REGARDIE, WILLIAM
Address PO BOX 724
City-State-Zip: KEY WEST FL 33041

Title VP
Name MALONEY, TIMOTHY
Address PO BOX 724
City-State-Zip: KEY WEST FL 33041

Title TREASURER
Name MENDITCH, FRANK
Address PO BOX 724
City-State-Zip: KEY WEST FL 33041

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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: ELWELL, CHRISTOPHER

PRESIDENT

01/18/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MIANO, KATE
Address PO BOX 724
City-State-Zip: KEY WEST FL 33041

Title DIRECTOR
Name MARTIN, DANIELLE
Address 407 WALL ST
WATERFRONT PLAYHOUSE
City-State-Zip: KEY WEST FL 33040

Title SECRETARY
Name WISE, STEPHANIE
Address 407 WALL ST
WATERFRONT PLAYHOUSE
City-State-Zip: KEY WEST FL 33040

Title DIRECTOR
Name TISHOCK, PAULA
Address 407 WALL ST
City-State-Zip: KEY WEST FL 33041

Title DIRECTOR
Name RUNSTADLER, RYAN
Address 407 WALL ST
WATERFRONT PLAYHOUSE
City-State-Zip: KEY WEST FL 33040

Title DIRECTOR
Name JONES, BRANDON
Address 407 WALL ST
WATERFRONT PLAYHOUSE
City-State-Zip: KEY WEST FL 33040

Title DIRECTOR
Name TRIPPI, JOE
Address 407 WALL ST
City-State-Zip: KEY WEST FL 33041