

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000005436

**Entity Name:** ROTARY CLUB OF KEY WEST, FLORIDA, INC.

**FILED**  
**Mar 06, 2024**  
**Secretary of State**  
**2911607768CC**

**Current Principal Place of Business:**

1107 KEY PLAZA  
#294  
KEY WEST, FL 33040

**Current Mailing Address:**

1107 KEY PLAZA  
#294  
KEY WEST, FL 33040 US

**FEI Number: 59-6152300**

**Certificate of Status Desired: No**

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

KNOWLES, LISA  
1107 KEY PLAZA  
#294  
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:** LISA KNOWLES

03/06/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            TALBOTT, YVETTE  
Address        1107 KEY PLAZA BOX #294  
City-State-Zip: KEY WEST FL 33040

Title            DIRECTOR  
Name            CRANNEY-BLACK, JILLIAN  
Address        1107 KEY PLAZA BOX #294  
City-State-Zip: KEY WEST FL 33040

Title            PAST-PRESIDENT  
Name            CRANE, CATHY  
Address        1107 KEY PLAZA BOX #294  
City-State-Zip: KEY WEST FL 33040

Title            OTHER  
Name            OROPEZA, RACHEL  
Address        1107 KEY PLAZA  
                  BOX #294  
City-State-Zip: KEY WEST FL 33040

Title            TREASURER  
Name            CASO, JOE  
Address        1107 KEY PLAZA  
                  #294  
City-State-Zip: KEY WEST FL 33040

Title            SECRETARY  
Name            MYERS, BRITT  
Address        1107 KEY PLAZA  
                  #294  
City-State-Zip: KEY WEST FL 33040

Title            DIRECTOR  
Name            OCCHIUTO, DANIELLE  
Address        1107 KEY PLAZA  
                  #294  
City-State-Zip: KEY WEST FL 33040

Title            DIRECTOR  
Name            MCDOWELL, MEGAN  
Address        1107 KEY PLAZA  
                  #294  
City-State-Zip: KEY WEST FL 33040

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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:** YVETTE TALBOTT

PRESIDENT

03/06/2024

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name BRANDENBERG, SEAN  
Address 1107 KEY PLAZA  
#294  
City-State-Zip: KEY WEST FL 33040

Title DIRECTOR  
Name CRANNEY, JESSICA  
Address 1107 KEY PLAZA  
#294  
City-State-Zip: KEY WEST FL 33040

Title DIRECTOR  
Name MARTIN, LAUREN  
Address 1107 KEY PLAZA  
#294  
City-State-Zip: KEY WEST FL 33040

Title DIRECTOR  
Name FLOWERS, ROLAND  
Address 1107 KEY PLAZA  
#294  
City-State-Zip: KEY WEST FL 33040