

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000005436

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

**FILED**  
**Mar 06, 2016**  
**Secretary of State**  
**CC7685975377**

**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

03/06/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PAST -PRESIDENT  
Name ELIZABETH, MACLAUGHLIN  
Address 819 PEACOCK PLAZA #118  
City-State-Zip: KEY WEST FL 33040

Title PRESIDENT  
Name OROPEZA, RACHEL  
Address 819 PEACOCK PLAZA #118  
City-State-Zip: KEY WEST FL 33040

Title PRESIDENT-ELECT  
Name VAN LOON, DAVID ESQ.  
Address 819 PEACOCK PLAZA #118  
City-State-Zip: KEY WEST FL 33040

Title SECRETARY  
Name GONZALEZ, ALBERT  
Address 819 PEACOCK PLAZA #118  
City-State-Zip: KEY WEST FL 33040

Title TREASURER  
Name CRANNEY-GAGE, JILL  
Address 819 PEACOCK PLAZA #118  
City-State-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:** JILL CRANNEY-GAGE

**TREASURER**

03/06/2016

Electronic Signature of Signing Officer/Director Detail

Date