The above hamed	entity submits this statement for the purpose of changing its	registered onice of regis	lered agent, or boun, in the State of Th	unua.
SIGNATURE	CRIS BEATY			08/24/2023
	Electronic Signature of Registered Agent			Date
Officer/Direc	ctor Detail :			
Title	TREASURER	Title	DIRECTOR	
Name	BEATY, CRIS E	Name	LIETAERT, LAURA	
Address	PO BOX 252	Address	P.O. BOX 252	
City-State-Zip:	KEY LARGO FL 33037-2435	City-State-Zip:	KEY LARGO FL 33037	
Title	DIRECTOR	Title	PRESIDENT	
Name	BOILINI, JIM	Name	ARRABAL, ASHLEY	
Address	P.O. BOX 252	Address	P.O. BOX 252	
City-State-Zip:	KEY LARGO FL 33037	City-State-Zip:	KEY LARGO FL 33037-2435	
Title	OFFICER	Title	VP	
Name	MILLER, JENNIFER	Name	HORTON, DON	
Address	P.O. BOX 252	Address	P.O. BOX 252	
City-State-Zip:	KEY LARGO FL 33037-2435	City-State-Zip:	KEY LARGO FL 33037-2435	
Title	SECRETARY	Title	DIRECTOR	
Name	RUSSO, STEPHANIE	Name	CHRIS, COSME	
Address	P.O. BOX 252	Address	P.O. BOX 252	
City-State-Zip:	KEY LARGO FL 33037-2435	City-State-Zip:	KEY LARGO FL 33037-2435	
		Continues of	Continues on page 2	

Current Mailing Address:

2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL

Entity Name: ROTARY CLUB OF KEY LARGO CHARITABLE EVENTS, INC.

P.O. BOX 252 KEY LARGO, FL 33037-2435 US

Current Principal Place of Business:

DOCUMENT# N0000007262

FEI Number: 65-1051517

91630 OVERSEAS HIGHWAY TAVERNIER, FL 33070

REPORT

Name and Address of Current Registered Agent:

BEATY, CRIS 91630 OVERSEAS HIGHWAY TAVERNIER, FL 33070 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.

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: CRIS BEATY

REGISTERED AGENT

08/24/2023

Electronic Signature of Signing Officer/Director Detail

FILED Aug 24, 2023 Secretary of State 0550836980CC

Certificate of Status Desired: No

Date

Officer/Director Detail Continued :

Title	DIRECTOR	Title	OFFICER
Name	VIGIL SIMMONS, MELISSA	Name	BAHN, CARLA
Address	P.O. BOX 252	Address	P.O. BOX 252
City-State-Zip:	KEY LARGO FL 33037-2435	City-State-Zip:	KEY LARGO FL 33037-2435
			0
Title	OFFICER	Title	OFFICER
Name	DURBIN, JAMES	Name	BRYAN, SPENCER
Address	P.O. BOX 252	Address	P.O. BOX 252
City-State-Zip:	KEY LARGO FL 33037-2435	City-State-Zip:	KEY LARGO FL 33037-2435
T .0.			
Title	OFFICER		
Name	MORRIS, SHELBY		
Address	P.O. BOX 252		

City-State-Zip: KEY LARGO FL 33037-2435