FEI Number: 27-3779132			Certificate of Status Desired: No	
Name and A	Address of Current Registered Agent:			
SMITH, FRANK 631 SOUTHAR KEY WEST, FL	D STREET			
The above named	d entity submits this statement for the purpose of changing its	registered office or regis	tered agent, or both, in the State of Fl	orida.
SIGNATURE	E: FRANK W SMITH			01/11/2017
	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Title	D	Title	D	
Name	SMITH, FRANK W	Name	BENSON, WILL	
Address	631 SOUTHARD STREET	Address	17216 BONITA LANE EAST	
City-State-Zip:	KEY WEST FL 33040	City-State-Zip:	SUGARLOAF KEY FL 33042	
Title	DIRECTOR			
Name	TRIPPE, STEPHEN M			
Address	623 WILLIAM ST			

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: FRANK W SMITH

City-State-Zip: KEY WEST FL 33040

Electronic Signature of Signing Officer/Director Detail

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000010690

Entity Name: THE FLORIDA KEYSKEEPER, INC.

Current Principal Place of Business:

631 SOUTHARD STREET KEY WEST, FL 33040

Current Mailing Address:

P.O. BOX 4205 KEY WEST, FL 33041

FEI N 07 0770400 . . .

Na

01/11/2017

FILED Jan 11, 2017 **Secretary of State** CC3991436284

PRESIDENT

Date