

2015 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N14000011450

Entity Name: FIRMKEYS, INC.

Current Principal Place of Business:

422 FLEMING STREET
SUITE 5
KEY WEST, FL 33040

Current Mailing Address:

422 FLEMING STREET
SUITE 5
KEY WEST, FL 33040

FEI Number: 47-2584731

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHRECK, CAROL A
2315 NORTH ROOSEVELT BLVD
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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name MONTAGNE, MEL
Address PO BOX 370541
City-State-Zip: KEY LARGO FL 33037

Title VP, DIRECTOR
Name RUSS, STEPHEN
Address PO BOX 718
City-State-Zip: KEY WEST FL 33041

Title TREASURER, DIRECTOR
Name WALSH, JOSEPH
Address 422 FLEMING ST. #5
City-State-Zip: KEY WEST FL 33040

Title SD
Name SCHRECK, CAROL A
Address 2315 NORTH ROOSEVELT BLVD
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: CAROL SCHRECK

SECRETARY

06/23/2015

Electronic Signature of Signing Officer/Director Detail

Date