

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000004246

**Entity Name:** LATCHKEY LEAGUE, INC.**Current Principal Place of Business:**592 AVELLINO ISLES CIRCLE, #21302  
NAPLES, FL 34119**Current Mailing Address:**P.O. BOX 413005  
#221  
NAPLES, FL 34101-3005 US**FEI Number:** 47-3966530**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BAILEY, BETTY A  
652-98TH AVENUE  
NAPLES, FL 34108 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:** BETTY A BAILEY

04/03/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name BOYD, WILMA  
Address 3430 GULF SHORE BLVD.N., #5-1  
City-State-Zip: NAPLES FL 34103

Title PRESIDENT  
Name BETTY, BAILEY A  
Address 652-98TH AVENUE  
City-State-Zip: NAPLES FL 34108

Title VP  
Name DAVIS, KAROLE  
Address 132 PEBBLE SHORES DRIVE  
204  
City-State-Zip: NAPLES FL 34110

Title DIRECTOR  
Name YOUNG, BOB  
Address 881 GULF PAVILIOON DRIVE  
101  
City-State-Zip: NAPLES FL 34108

Title SECRETARY  
Name SCHAEDEL, WENDY  
Address 274 EDMERE WAY E.  
City-State-Zip: NAPLES FL 34105

Title VP  
Name TEDDER, JUDY  
Address 4336 MOURNING DOVE DRIVE  
City-State-Zip: NAPLES FL 34119

Title DIRECTOR  
Name BETTIN, SALLY  
Address 200 WYNDEMERE WAY  
301  
City-State-Zip: NAPLES FL 34105

Title DIRECTOR  
Name MERILLAT, LYNETTE  
Address 2600 GORDON DRIVE  
City-State-Zip: NAPLES FL 34102

**Continues on page 2**

*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:** BETTY A BAILEY

PRESIDENT

04/03/2018

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	DIRECTOR
Name	WARNER, RYAN
Address	P.O. BOX 2525
City-State-Zip:	NAPLES FL 34106