

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N51179

**Entity Name:** PIGEON KEY FOUNDATION, INC.

**Current Principal Place of Business:**

PIGEON KEY ISLAND - OLD 7-MILE BRIDGE  
MARATHON, FL 33050

**Current Mailing Address:**

5800 OVERSEAS HIGHWAY #17  
MARATHON, FL 33050 US

**FEI Number:** 65-0379803

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MORATO, MARLENE CRUZ  
5800 OVERSEAS HIGHWAY, #17  
MARATHON, FL 33050 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:** MARLENE CRUZ MORATO

03/03/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VICE PRESIDENT  
Name PUTO, MIKE MR.  
Address P.O. BOX 500130  
City-State-Zip: MARATHON FL 33050

Title DIRECTOR  
Name STEINMETZ, ARNOLD GMR.  
Address P.O. BOX 500130  
City-State-Zip: MARATHON FL 33050

Title SECRETARY  
Name JASON, KOLER  
Address P.O. BOX 500130  
City-State-Zip: MARATHON FL 33050

Title PRESIDENT  
Name HILLER, DON  
Address PO BOX 500130  
City-State-Zip: MARATHON FL 33050

Title TREASURER  
Name ANTHONY, CAROLYN  
Address PO BOX 500130  
City-State-Zip: MARATHON FL 33050

Title DIRECTOR  
Name STEINMETZ, RIETT  
Address PO BOX 500130  
City-State-Zip: MARATHON FL 33050

Title DIRECTOR  
Name FRANCIS, DUANE  
Address PO BOX 500130  
City-State-Zip: MARATHON FL 33050

Title DIRECTOR  
Name MALAFY, RICHARD  
Address PO BOX 500130  
City-State-Zip: MARATHON FL 33050

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*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:** DON HILLER

PRESIDENT

03/03/2023

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            DE CROW, DENISE  
Address        PO BOX 500130  
City-State-Zip: MARATHON FL 33050