

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003265

FILED
Mar 20, 2017
Secretary of State
CC1900618514

Entity Name: KEY CENTER FOUNDATION, INC.

Current Principal Place of Business:

5399 W GULF TO LAKE HWY
LECANTO, FL 34461

Current Mailing Address:

5399 W GULF TO LAKE HWY
LECANTO, FL 34461 US

FEI Number: 59-3200079

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

COLE, CHESTER V
5399 W GULF TO LAKE HWY
LECANTO, FL 34661 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 P
Name DETMER, E. DAVID MR.
Address 85 S. MAYLEN AVENUE
City-State-Zip: LECANTO FL 34461

Title S/T
Name COLE, CHESTER VMR.
Address 5363 W. SAFARI LANE
City-State-Zip: LECANTO FL 34461

Title VP
Name JOYNER, SAMUEL
Address E. HWY 44 P.O. BOX 98
City-State-Zip: CRYSTAL RIVER FL 34423-0098

Title DIRECTOR
Name VICK, DENNIS
Address 5570 E TENISON STREET
City-State-Zip: INVERNESS FL 34452

Title DIRECTOR
Name COBURN, DALE
Address 954 N CONANT AVENUE
City-State-Zip: CRYSTAL RIVER FL 34429

Title DIRECTOR
Name HUPP, IRENE R
Address P.O. BOX 170
City-State-Zip: LECANTO FL 34460-0170

Title DIRECTOR
Name LEVINS, RUTH L.
Address P.O. BOX 803
City-State-Zip: CRYSTAL RIVER FL 34423-0803

Title DIRECTOR
Name ZEMANIK, CAROLYN
Address 2575 N LANTERN TERRACE
City-State-Zip: HERNANDO FL 34442

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: E. DAVID DETMER

PRESIDENT

03/20/2017

Electronic Signature of Signing Officer/Director Detail

Date