

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000090034

**Entity Name:** TRUMAN HOTEL, INC.

**Current Principal Place of Business:**

611 TRUMAN AVE  
KEY WEST, FL 33040

**Current Mailing Address:**

615-B UNITED STREET  
KEY WEST, FL 33040 US

**FEI Number:** 05-0537462

**Certificate of Status Desired:** No

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

KEMP, WILLIAM O  
615-B UNITED STREET  
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	P	Title	V
Name	KEMP, WILLIAM O	Name	WHITE, C. MARSHALL
Address	615-B UNITED STREET	Address	6574 PALMER PARK CIRCLE
City-State-Zip:	KEY WEST FL 33040	City-State-Zip:	SARASOTA FL 34238
Title	T	Title	S
Name	LOER, GARY A	Name	KEMP, SUSAN
Address	6574 PALMER PARK CIRCLE	Address	615-B UNITED STREET
City-State-Zip:	SARASOTA FL 34238	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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KEMP, WILLIAM

P

03/14/2023

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date