

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 17, 2006 08:00 AM
Secretary of State

DOCUMENT # 700687

1. Entity Name

PRESBYTERIAN KIRK OF THE KEYS INC



Principal Place of Business

8877 OVERSEAS HWY
MARATHON FL 33050

Mailing Address

PO BOX 501078
MARATHON FL 33050



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-6161004

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HIGGINS, GLADYS A
141 10TH ST
KEY COLONY BEACH FL 33051

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typ. printed name of registered agent and

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME DANIELS, BEN
STREET ADDRESS 39 TREASURE RD
CITY-ST-ZIP MARATHON FL 33050

TITLE SD ☐ Delete
NAME HIGGINS, GLADYS
STREET ADDRESS 601 W OCEAN DR
CITY-ST-ZIP KEY COLONY BEACH FL 33051

TITLE VPD ☐ Delete
NAME WRIGHT, HOWARD
STREET ADDRESS RT. 32, BOX 58671
CITY-ST-ZIP MARATHON FL 33050

TITLE T ☐ Delete
NAME HIGGINS, GLADYS
STREET ADDRESS 601 W. OCEAN DRIVE
CITY-ST-ZIP KEY COLONY BCH FL 33051

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 000000472545
CITY-ST-ZIP 03/29/06-80041-001 61.25

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

[Handwritten Signature]

(305) 743-4256