

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 11, 2008 8:00 am
Secretary of State

04-11-2008 90045 012 ****61.25

DOCUMENT # 702235

1. Entity Name

KEY WEST BAPTIST TEMPLE, INC.



Principal Place of Business

5727 SECOND AVENUE
KEY WEST FL 33040
US

Mailing Address

PO BOX 2298
KEY WEST FL 33045
US



2. Principal Place of Business - No P.O. Box #

5727 2ND. AVE 33040

3. Mailing Address

P.O. Box 2298 33045

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/07)

City & State

KEY WEST FL 33040

City & State

4. FEI Number

59-1621079

Applied For

Not Applicable

Zip

33040

Country

MONROE

Zip

33040

Country

MONROE

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WRIGHT, MORRIS O
5702 1ST AVENUE
KEY WEST FL 33040

Name

SAME

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, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

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 D
NAME PEREZ, ERASTO ☒ Delete
STREET ADDRESS 1317 6TH ST
CITY- ST- ZIP KEY WEST FL 33040

TITLE VD ☒ Delete
NAME SMITH, TIMOTHY
STREET ADDRESS 181 STAR LN
CITY- ST- ZIP KEY WEST FL 33040

TITLE TD ☒ Delete
NAME CHEEK, RAY
STREET ADDRESS 1400 KENNEDY DR APT 102
CITY- ST- ZIP KEY WEST FL 33040

TITLE P ☒ Delete
NAME WRIGHT, MORRIS O
STREET ADDRESS 5702 1ST AVENUE
CITY- ST- ZIP KEY WEST FL 33040

TITLE D ☒ Delete
NAME CARTER, EARL
STREET ADDRESS 31 BAY DRIVE
CITY- ST- ZIP KEY WEST FL 33040

TITLE S ☒ Delete
NAME WRIGHT, WANDA
STREET ADDRESS 5702 FIRST AVE
CITY- ST- ZIP KEY WEST FL 33040

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P ☒ Change ☐ Addition
NAME WRIGHT, MORRIS O.
STREET ADDRESS 5702 1ST. AVE KEY WEST, FL 33040
CITY- ST- ZIP

TITLE T ☒ Change ☐ Addition
NAME SMITH, TIM
STREET ADDRESS 181 STAR LANE KEY WEST FL 33040
CITY- ST- ZIP

TITLE T ☐ Change ☒ Addition
NAME BILL FOWLER
STREET ADDRESS 20880 7 AVE. W CUDJOE KEY FL 33042
CITY- ST- ZIP

TITLE T ☐ Change ☒ Addition
NAME HUMBERT, JACOB
STREET ADDRESS 5228 COLLEGE RD KEY WEST FL 33040
CITY- ST- ZIP

TITLE T ☒ Change ☐ Addition
NAME PEREZ, ERASTO
STREET ADDRESS 1317 6TH. ST KEY WEST, FL 33040
CITY- ST- ZIP

TITLE T/T ☒ Change ☐ Addition
NAME WRIGHT, WANDA
STREET ADDRESS 5702 1ST. AVE KEY WEST FL 33040
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:

[Signature]
SIGNATURE OF OFFICER OR DIRECTOR, OR SIGNATURE OF REGISTERED AGENT

3-27-08 305-294-2789