1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 712195

1. Corporation Name

KEY WEST ROD AND GUN CLUB, INC.

Principal Place of Bu
P. O. BOX 528 KEY WEST FL 33040
US

2. Principal Place of Business

Suite, Apt. #, etc.

Mailing Address

P. O. BOX 528 KEY WEST FL 33040

2a. Mailing Address

Suite, Apt. #, etc.

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FILED Mar 03, 1999 8:00 am § Secretary of State

03-03-1999 90034 020 ****61.25

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Applied For

Not Applicable

3. Date Incorporated or Qualifed

02/02/1967 4. FEI Number

54-0300881

22		_ -				#0 7E .				
City & State		City & State		5. Certificate of Status Desired		\$8.75 Additional Fee Required				
Zip	Country	Zip	Country		6. Election Campaign Financing	\$5.00 N	-			
24	25		10		Trust Fund Contribution	Added to	rees			
	9. Name and Address of Curren	t Registered Agent	81	Name	10. Name and Address of New Registere	n Affaur				
			6'	Manne	•	· · ·				
MORSE, L	EIGHTON G		82	Street Add	et Address (P.O. Box Number is Not Acceptable)					
444 WHITI	ehead St.				· , , , , , , , , , , , , , , , , , , ,					
KEY WES	T FL 33040		83							
			84	City		85 Zip Co	ode			
					<u> </u>					
office or r agent. I a	to the provisions of Sections 617.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was aut	thorized by	tne corporat	poration submits this statement for the purpose tion's board of directors. I hereby accept the app	of changing its re ointment as regi	egistered istered			
SIGNATURE	Signature, typed or printed name of registered ages	nt and title if applicable. (NOTE: F	Registered Agen	t signature requir	red when reinstating) DATE	,				
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTOR	RS IN 12			
TITLE	PD	DELETE	1.1 TITLE	P	2 D	Change Change	Addition			
NAME	LEMMERT, BOB		1.2 NAME	· 1	ANECKA, STANLEY					
STREET ADDRESS	13 S. AIRPORT DRIVE		1.3 STREET		554 SUHRISE DRIVE					
CITY-ST-ZIP	SUMMERLAND KEY FL 33042		1.4 CITY-S	r-zip E	31G PINE MEY, FL. 33043					
TITLE	VD	☐ DELETE	2.1 TITLE		P	Change	☐ Addition			
NAME	JANECKA, STANLEY		2.2 NAME		-AFKIN, JOHN					
STREET ADDRESS	ACCUALINATION DON'T		2.3 STREET	ADDRESS P	P.C. BOX 3B					
CITY-ST-ZIP	BIG PINE KEY FL 33043		2. 4 CITY-S	T-ZIP S	SKY PINE KEY, FL. 33043					
TITLE	STD	☐ DELETE	3.1 TITLE		TO .	∠ Change	☐ Addition			
NAME	PEACOCK, DESIREE V		3.2 NAME	_	AHECKA, KATHLEEN	* : .	- :			
STREET ADDRESS	AAAAE IDIO DD		3.3 STREET	ADDRESS 16	554 SUHRISE DR.					
CITY-ST-ZIP	BIG PINE KEY FL 33043		3.4. CITY-S		BIG PINE KEVIFL 33043					
TITLE	MDSO	☐ DELETE	4.1 TITLE		^D\$O	Change	Addition			
NAME	MORSE, LEIGHTON G.		4. 2 NAME	اسا	emmert, bob					
STREET ADDRESS	444 WHITEHEAD ST.		4.3 STREET	ADDRESS 1	35. AIRPORT DR	-				
CITY-ST-ZIP	KEY WEST FL 33040		4.4 CITY-S		UMMERLAND KEY FL. 330	42				
TITLE	ML.	☐ DELETE	5.1 TITLE		١ـ	Change	Addition			
NAME	GEORGE, JOSEPH P		5.2 NAME	N	LORSE, LEIGHTON	_				
STREET ADDRESS			5.3 STREET	ADDRESS 4	144 NHITEHEAD ST.	`,				
CITY-ST-ZIP	KEY WEST FL 33040		5.4 CITY-S	r-zip 🃈	KEY WEST, FL. 33040					
TITLE	1121 1120112 00010	☐ DELETE	6.1 TITLE			☐ Change	Addition			
NAME			6.2 NAME							
STREET ADDRESS]	/ \	6.3 STREET	ADDRESS						
	/		6.4 CITY-S							
CITY-ST-ZIP	certify that the information supplied w	h this filing does not qualify for t	he exempti	on stated in	Section 119.07(3)(i), Florida Statutes. I further of	ertify that the in	formation			
indicated	on this annual report or supplementa	annual report is true and accura	ate and that	my signatu	ire shall have the same legal effect as if made un	nder oath; that I	am an			

SIGNATURE: