

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Jun 12, 2012
Secretary of State**

DOCUMENT# 756883

Entity Name: KEY WEST WOMAN'S CLUB, INC.**Current Principal Place of Business:**319 DUVAL ST
KEY WEST, FL 33040**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 2924
KEY WEST, FL 33045**New Mailing Address:****FEI Number:** 59-2126139**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**FERRIS, LOUISE
9 MC COY CIRCLE
KEY WEST, FL 33040 US**Name and Address of New Registered Agent:**

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

OFFICERS AND DIRECTORS:

Title: P
Name: SPENCER, ROBERTA
Address: 28 AMARYLLIS DR
City-St-Zip: KEY WEST, FL 33040

Title: 1VP
Name: KAWALER, EILEEN
Address: 1901 S ROOSEVELT BLVD
City-St-Zip: KEY WEST, FL 33040

Title: T
Name: FERRIS, LOUISE
Address: 9 MCCOY CIR
City-St-Zip: KEY WEST, FL 33040

Title: D
Name: RODRIGUEZ, JOY
Address: 1113 STUMP LANE
City-St-Zip: KEY WEST, FL 33040

Title: 2VP
Name: MADDOX, NATALIE
Address: 278 SCORPIO LANE
City-St-Zip: KEY WEST, FL 33040

Title: S
Name: EATON, RITA
Address: 1435 S. ROOSEVELT BLVD
City-St-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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LOUISE FERRIS

T

06/12/2012

Electronic Signature of Signing Officer or Director

Date