

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

FILED
Feb 08, 2008 8:00 am
Secretary of State

02-08-2008 90042 022 ****61.25

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1. Entity Name

KEY WEST MARITIME HISTORICAL SOCIETY OF THE
FLORIDA KEYS, INC.



Principal Place of Business

Change as below
~~614 GREENE ST~~ **410 Simon St**
~~APT #3~~ **APT #4**
KEY WEST FL 33041

Mailing Address

✓ OK
PO BOX 695
KEY WEST FL 33041-0695
US

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

410 Simon St

3. Mailing Address

Suite, Apt. #, etc.

APT #4

City & State

Key West, FL

City & State

Zip

33040

Country

USA

Country

USA

4. FEI Number

58-2117239

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HORAN, DAVID PAUL
608 WHITEHEAD ST.
KEY WEST FL 33040

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

(NOTE: Registered Agent signature is required when reinstating)

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 PD ☐ Delete
NAME LITTLE, EDWARD J JR.
STREET ADDRESS 614 GREENE STREET, APT#3
CITY-ST-ZIP KEY WEST FL

TITLE D ☐ Delete
NAME VIELE, JOHN
STREET ADDRESS #10 FOURTH AVENUE
CITY-ST-ZIP SUMMERLAND KY

TITLE D ☐ Delete
NAME LOWE, DONALD
STREET ADDRESS 683 SAWYER DR.
CITY-ST-ZIP SUMMERLAND KEY FL 33042

TITLE DT ☐ Delete
NAME HAMBRIGHT, LYNDIA
STREET ADDRESS 2923 RIVIERA DRIVE
CITY-ST-ZIP KEY WEST FL

TITLE D ☐ Delete
NAME HAMBRIGHT, TOM
STREET ADDRESS 2923 RIVIERA DRIVE
CITY-ST-ZIP KEY WEST FL

TITLE D ☐ Delete
NAME MALCOM, COREY
STREET ADDRESS 1608 DUNCAN ST.
CITY-ST-ZIP KEY WEST FL 33040

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE ☐ Change ☐ Addition
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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:

Edward J. Little Jr.

January 29, 2008