

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761388

FILED
Apr 12, 2009
Secretary of State

Entity Name: ZONTA CLUB OF KEY WEST, INC.

Current Principal Place of Business:

24 AMARYLLIS DRIVE
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

PO BOX 0184
KEY WEST, FL 33041 US

New Mailing Address:

FEI Number: 59-2176317

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, LOUANNA
24 AMARYLLIS DR
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: WV () Delete
Name: SHAFFER, AMBER
Address: 20949 FIFTH AVE.,
City-St-Zip: CUDJOE KEY, FL 33042

Title: T () Delete
Name: WILLIAMS, LOUANNA
Address: 24 AMARYLLIS DR
City-St-Zip: KEY WEST, FL 33040

Title: P () Delete
Name: AXFORD, TERRI
Address: 1401 4TH STREET
City-St-Zip: KEY WEST, FL 33040

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SHAFFER, AMBER
Address: 20949 FIFTH AVE.,
City-St-Zip: CUDJOE KEY, FL 33042

Title: VP (X) Change () Addition
Name: WILLIAMS, LOUANNA
Address: 24 AMARYLLIS DR
City-St-Zip: KEY WEST, FL 33040

Title: T (X) Change () Addition
Name: WHEELER, KRISTEN
Address: 507 AMELIA STREET
City-St-Zip: KEY WEST, FL 33040

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LOUANNA WILLIAMS

VP

04/12/2009

Electronic Signature of Signing Officer or Director

Date