2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000002809

FILED Jan 14, 2006 Secretary of State

Entity Name: ZONTA FOUNDATION OF KEY WEST, INC.

Current Principal Place of Business: New Principal Place of Business:

1702 N ROOSEVELT BLVD. 925 TOPPINO DRIVE KEY WEST, FL 33040 KEY WEST, FL 33040

Current Mailing Address: New Mailing Address:

PO BOX 0184

KEY WEST, FL 33041

FEI Number: 65-1007404 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FERRIS, LOUISE PO BOX 0184

KEY WEST, FL 33041 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PED () Delete
 Title:
 P (X) Change () Addition

 Name:
 FITZGERALD, RANNY
 Name:
 BARACK, JERILYN

 Address:
 1311 PINE ST
 Address:
 3075 FLAGLER AVE #13

 City-St-Zip:
 KEY WEST, FL 33040
 City-St-Zip:
 KEY WEST, FL 33040

Title: PD () Delete Title: T (X) Change () Addition

 Name:
 FERRIS, LOUISE
 Name:
 FERRIS, LOUISE

 Address:
 1702 N ROOSEVELT BLVD.
 Address:
 PO BOX 0184

 City-St-Zip:
 KEY WEST, FL 33040
 City-St-Zip:
 KEY WEST, FL 33041

Title: SD (X) Delete Title: () Change () Addition

 Name:
 WERLING, DENISE
 Name:

 Address:
 P.O. BOX 1042
 Address:

 City-St-Zip:
 SUMMERLAND KEY, FL 33042
 City-St-Zip:

 Name:
 HUTTON, SUZANNE
 Name:

 Address:
 551 PINE LANE
 Address:

 City-St-Zip:
 BIG PINE KEY, FL 330434611
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: LOUISE FERRIS T 01/14/2006