

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000505

FILED
Apr 20, 2009
Secretary of State

Entity Name: THE KEY WEST--HARRY S. TRUMAN FOUNDATION, INC.

Current Principal Place of Business:

111 FRONT STREET
KEY WEST, FL 33040

New Principal Place of Business:

111 FRONT STREET
KEY WEST, FL 33040 US

Current Mailing Address:

111 FRONT STREET
KEY WEST, FL 33040

New Mailing Address:

111 FRONT STREET
KEY WEST, FL 33040 US

FEI Number: 75-2979668

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWIFT, EDWIN O III
201 FRONT STREET #107
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: D () Delete
Name: SWIFT, EDWIN O III
Address: 111 FRONT STREET
City-St-Zip: KEY WEST, FL 33040

Title: D () Delete
Name: BELLAND, CHRISTOPHER C
Address: 111 FRONT STREET
City-St-Zip: KEY WEST, FL 33040

Title: D () Delete
Name: MOSHER, GERALD R
Address: 111 FRONT STREET
City-St-Zip: KEY WEST, FL 33040

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SWIFT, EDWIN O III
Address: 111 FRONT STREET
City-St-Zip: KEY WEST, FL 33040 US

Title: D (X) Change () Addition
Name: BELLAND, CHRISTOPHER C
Address: 111 FRONT STREET
City-St-Zip: KEY WEST, FL 33040 US

Title: D (X) Change () Addition
Name: MOSHER, GERALD R
Address: 111 FRONT STREET
City-St-Zip: KEY WEST, FL 33040 US

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: EDWIN O. SWIFT, III

D

04/20/2009

Electronic Signature of Signing Officer or Director

Date