2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2004
Secretary of State

DOCUMENT# N03000007660

Entity Name: SAN PEDRO WOMEN'S GUILD OF THE KEYS INC.

Current Principal Place of Business:

SAN PEDRO CATHOLIC CHURCH
89500 OVERSEAS HIGHWAY
ISLAMORADA, FL 33036

New Principal Place of Business:

Current Mailing Address:

SAN PEDRO WOMEN'S GUILD OF THE KEYS INC.
P.O. 433
TAVERNIER, FL 33070

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITS, DIRK
81990 OVERSEAS HIGHWAY
3RD FLOOR
ISLAMORADA, FL 33036 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 ( ) Delete
Name: HANFORD, CAROLYN
Address: 1500 OCEAN BAY DRIVE, UNIT R6
City-St-Zip: KEY LARGO, FL 33037

Title: VP ( ) Delete
Name: BETOLATTI, BARBARA
Address: 87200 OVERSEAS HIGHWAY, UNIT A7
City-St-Zip: ISLAMORADA, FL 33036

Title: S ( ) Delete
Name: IRWIN, BETTE
Address: 149 LAKE ROAD
City-St-Zip: TAVERNIER, FL 33070

Title: TR ( ) Delete
Name: GASSLER, MARIE
Address: 113 BAYVIEW ISLE DRIVE
City-St-Zip: ISLAMORADA, FL 33036

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARIE GASSLER TR 04/02/2004
Electronic Signature of Signing Officer or Director — Date