

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007660

FILED  
Apr 01, 2006  
Secretary of State

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: 05-0588002      FEI Number Applied For ( )      FEI Number Not Applicable ( )      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: P (X) Change ( ) Addition  
Name: BETOLATTI, BARBARA  
Address: 87200 OVERSEAS HWY R-7  
City-St-Zip: ISLAMORADA, FL 33036

Title: VP (X) Change ( ) Addition  
Name: MIELE, NANCY  
Address: 318 BAY VIEW AVENUE  
City-St-Zip: KEY LARGO, FL 33037

Title: S (X) Change ( ) Addition  
Name: SCHELER, SANDEE  
Address: 88181 OVERSEAS HWY G3  
City-St-Zip: ISLAMORADA, FL 33036

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 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: MARIE GASSLER

T

04/01/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date