2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N05000005925

L FILED
Sep 18, 2006
Secretary of State

Entity Name: KEY WEST SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS, INC.

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

58 FRONT ST. 1206 MARGARET ST. KEY WEST, FL 33040 KEY WEST, FL 33040

Current Mailing Address: New Mailing Address:

 58 FRONT ST.
 1206 MARGARET ST.

 KEY WEST, FL 33040
 KEY WEST, FL 33040

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

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

TUKEY, JOAN FOLEY, THERESA
58 FRONT ST. 1206 MARGARET ST.
KEY WEST, FL 33040 US KEY WEST, FL 33040 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: THERESA FOLEY 09/18/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: MR. () Delete Title: PRES (X) Change () Addition

 Name:
 EVANS, PETER
 Name:
 FOLEY, THERESA

 Address:
 58 FRONT ST.
 Address:
 1206 MARGARET ST.

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

Title: MS. () Delete Title: SEC. (X) Change () Addition Name: FOLEY, THERESA Name: NORTHROP, KIM

 Name:
 FOLEY, THERESA
 Name:
 NORTHROP, KIM

 Address:
 58 FRONT ST.
 Address:
 2538 WOOD ST.

 City-St-Zip:
 KEY WEST, FL 33040
 City-St-Zip:
 SARASOTA, FL 34237

Title: MS. () Delete Title: DIR. (X) Change () Addition

 Name:
 TUKEY, JOAN
 Name:
 AVELLAR, ANN

 Address:
 58 FRONT ST
 Address:
 2835 FLAGLER AVE.

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

Title: MR. () Delete Title: DIR. (X) Change () Addition

 Name:
 TUKEY, THOMAS
 Name:
 BOOTH, DON

 Address:
 58 FRONT ST
 Address:
 411 CATHERINE ST.

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

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: THERESA FOLEY PRES 09/18/2006