

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008831

FILED  
Apr 09, 2012  
Secretary of State

**Entity Name:** KEY WEST CHAPTER OF SNI, INC.

**Current Principal Place of Business:**

3128 N ROOSEVELT BLVD  
KEY WEST, FL 33040 US

**New Principal Place of Business:**

429 CAROLINE STREET  
APT. 4  
KEY WEST, FL 33040 US

**Current Mailing Address:**

3128 N ROOSEVELT BLVD  
KEY WEST, FL 33040 US

**New Mailing Address:**

429 CAROLINE STREET  
APT. 4  
KEY WEST, FL 33040 US

**FEI Number:** 38-3792943

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BEN J. HAYES, P.A.  
6161 DR. MARTIN LUTHER KING JR. ST. NORTH  
SUITE NO. 205  
ST. PETERSBURG, FL 33703 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:** DP  
**Name:** ERHARD, DAVID  
**Address:** 429 CAROLINE STREET, APT. 4  
**City-St-Zip:** KEY WEST, FL 33040

**Title:** O  
**Name:** MILLER, GREG  
**Address:** 419-3 WILLIAM STREET  
**City-St-Zip:** KEY WEST, FL 33040

**Title:** O  
**Name:** WALTER, CORY  
**Address:** 506 84TH STREET  
**City-St-Zip:** MARATHON, FL 33050

I hereby 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 all other like empowered.

**SIGNATURE:** BEN J. HAYES

PRES

04/09/2012

Electronic Signature of Signing Officer or Director

Date