## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N09000004666

FILED Apr 08, 2010 Secretary of State

**New Principal Place of Business:** 

Entity Name: THE PEOPLE'S THEATER OF KEY WEST, INC.

Current Principal Place of Business:

617 GRINNELL ST, UNIT 1N KEY WEST, FL 33040

Current Mailing Address: New Mailing Address:

617 GRINNELL ST, UNIT 1N KEY WEST, FL 33040

FEI Number: 26-4804645 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

HURST, CONNIE
6148 FRANCES STREET
KEY WEST, FL 33040 US
HURST, CONNIE
617 GRINNELL STREET
1N
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: 04/08/2010

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: CHRM

Name: HURST, CONNIE

Address: 617 GRINNELL STREET, #1N City-St-Zip: KEY WEST, FL 33040

Title: 7

 Name:
 SEPTIC, ANNE

 Address:
 P.O. BOX 6524

 City-St-Zip:
 KEY WEST, FL 33040

Title: S

Name: HADLEY, JUDY

Address: 1800 ATLANTIC BLVD. #C322 City-St-Zip: KEY WEST, FL 33040

Title: [

 Name:
 TITTEL, CHRIS

 Address:
 803 WHITEHEAD ST. #2

 City-St-Zip:
 KEY WEST, FL 33040

Title:

 Name:
 SHANLEY, TAMMY

 Address:
 1020 GRINNELL ST.

 City-St-Zip:
 KEY WEST, FL 33040

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: ANNE M. SEPTIC T 04/08/2010