

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
May 30, 2012
Secretary of State

DOCUMENT# N10000008359

Entity Name: HSMAI FLORIDA KEYS CHAPTER INC**Current Principal Place of Business:**908 C FRANCES ST.
KEY WEST, FL 33040**New Principal Place of Business:**3841 NORTH ROOSEVELT BLVD
KEY WEST, FL 33040**Current Mailing Address:**908 C FRANCES ST.
KEY WEST, FL 33040**New Mailing Address:**3841 NORTH ROOSEVELT BLVD
KEY WEST, FL 33040**FEI Number:** 65-0691305**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**MICHAUD, DON
908 C FRANCES ST.
KEY WEST, FL 33040 US**Name and Address of New Registered Agent:**MECHALSKE, JAMES
3841 NORTH ROOSEVELT BLVD
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: JAMES MECHALSKE

05/30/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: WYTHE, GREG
Address: 330 ELIZABETH ST.
City-St-Zip: KEY WEST, FL 33040 US

Title: TREA
Name: MECHALSKE, JAMES
Address: 3841 NORTH ROOSEVELT BLVD
City-St-Zip: KEY WEST, FL 33040 US

Title: SEC
Name: POLLACK, STACY
Address: 500 DUVAL STREET
City-St-Zip: KEY WEST, FL 33040 US

Title: M
Name: DEBEVEC, AMBER
Address: 1107 KEY PLAZA
City-St-Zip: KEY WEST, FL 33040 US

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: JAMES MECHALSKE

TREA

05/30/2012

Electronic Signature of Signing Officer or Director

Date