

2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N13000007165

FILED
Oct 02, 2014
Secretary of State

Entity Name: THE CITY OF KEY WEST, INC.

Current Principal Place of Business:

3132 FLAGLER AVE.
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

3132 FLAGLER AVE.
KEY WEST, FL 33040

New Mailing Address:

FEI Number: 38-3916807

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, SHAWN D ESQ
3128 FLAGLER AVE
KEY WEST, FL 33040 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: SHAWN D. SMITH

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: CATES, CRAIG
Address: 3132 FLAGLER AVE.
City-St-Zip: KEY WEST, FL 33040

Title: B
Name: LOPEZ, CLAYTON
Address: 3132 FLAGLER AVE
City-St-Zip: KEY WEST, FL 33040

Title: B
Name: ROSSI, MARK
Address: 3132 FLAGLER AVE
City-St-Zip: KEY WEST, FL 33040

Title: B
Name: JOHNSTON, TERRI
Address: 3132 FLAGLER AVE.
City-St-Zip: KEY WEST, FL 33040

Title: B
Name: WARDLOW, WILLIAM
Address: 3132 FLAGLER AVE
City-St-Zip: KEY WEST, FL 33040

Title: B
Name: WEEKLY, JAMES
Address: 3132 FLAGLER AVE
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: SHAWN D. SMITH

R/A

10/02/2014

Electronic Signature of Signing Officer or Director

Date