

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19222

FILED  
Jan 29, 2012  
Secretary of State

**Entity Name:** KEY WEST LITERARY SEMINAR, INC.

**Current Principal Place of Business:**

718 LOVE LANE  
KEY WEST, FL 33040 US

**New Principal Place of Business:**

718 LOVE LANE  
APT/SUITE  
KEY WEST, FL 33040 US

**Current Mailing Address:**

55 GLADE LANE  
BLACK MOUNTAIN, NC 28711 US

**New Mailing Address:**

**FEI Number:** 59-2807058

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHELBY, DIANE  
1611 VON PHISTER  
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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: KAUFELT, LYNN  
Address: P.O. BOX 182  
City-St-Zip: KEY WEST, FL 33041

Title: D  
Name: FRIEDEN, MILES  
Address: 55 GLADE LANE  
City-St-Zip: BLACK MOUNTAIN, NC 28711

Title: D  
Name: GRUSIN, MARY  
Address: 2518 STAPLES  
City-St-Zip: KEY WEST, FL 33040

Title: D  
Name: GLEICK, JAMES  
Address: 748 WINDSOR LANE  
City-St-Zip: KEY WEST, FL 33040

Title: D  
Name: KLINGENER, NANCY  
Address: 411 GRINNELL ST.  
City-St-Zip: KEY WEST, FL

Title: D  
Name: MESKER, SUSAN  
Address: 512 WILLIAM 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: MILES FRIEDEN

DIR

01/29/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date