

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26458

FILED
Mar 16, 2007
Secretary of State

Entity Name: FLORIDA KEYS MARINE SANCTUARY, INC.

Current Principal Place of Business:

LOOE KEY DIVE CENTER
27340 OVERSEAS HWY
RAMROD KEY, FL 33042 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 4333
KEY WEST, FL 33041 US

New Mailing Address:

FEI Number: 65-0165734 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GLENN, JOSEPH P
1208 PINE ST.
KEY WEST, FL 33041 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: PRES () Delete
Name: GLENN, JOSEPH P
Address: PO BOX 4333
City-St-Zip: KEY WEST, FL 33041

Title: VP () Delete
Name: TAYLOR, CLARA
Address: P.O. BOX 22
City-St-Zip: KEY WEST, FL 33041

Title: D () Delete
Name: NELSON, JAN
Address: 2601 S. ROOSEVELT BLVD #3C
City-St-Zip: KEY WEST, FL 33040

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOSEPH GLENN

PRES

03/16/2007

Electronic Signature of Signing Officer or Director

_____ Date