

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35404

FILED
Apr 18, 2009
Secretary of State

Entity Name: CRIME STOPPERS OF THE KEYS, INC.

Current Principal Place of Business:

1001 JAMES STREET
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

1001 JAMES STREET
KEY WEST, FL 33040

New Mailing Address:

FEI Number: 65-0367412

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORGAN, DOUG
3706-H NORTH ROOSEVELT BLVD
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: PD () Delete
Name: ARTMAN, GREG
Address: 1547 5TH STREET
City-St-Zip: KEY WEST, FL 33040

Title: VPD () Delete
Name: SAWYER, HARRY JR
Address: 3930 SOUTH ROOSEVELT BLVD.
City-St-Zip: KEY WEST, FL 33040

Title: STD () Delete
Name: RZAD, STANLEY T
Address: 3930 SOUTH ROOSEVELT BLVD.
City-St-Zip: KEY WEST, FL 33040

Title: () Delete
Name:
Address:
City-St-Zip:

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:

Title: D () Change (X) Addition
Name: GIBSON, DIANE J
Address: 3406 N ROOSEVELT BLVD
City-St-Zip: KEY WEST, FL 33040

I hereby certify that the information supplied with this filing does not qualify 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: DIANE GIBSON

D

04/18/2009

Electronic Signature of Signing Officer or Director

Date