

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36293

FILED  
Apr 29, 2008  
Secretary of State

Entity Name: FLORIDA KEYS AREA HEALTH EDUCATION CENTER, INC.

## Current Principal Place of Business:

5800 OVERSEAS HIGHWAY  
SUITE #38  
MARATHON, FL 33050 US

## New Principal Place of Business:

## Current Mailing Address:

5800 OVERSEAS HIGHWAY  
SUITE #38  
MARATHON, FL 33050 US

## New Mailing Address:

FEI Number: 65-0183810      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

YANKOW, NANCY  
88101 OVERSEAS HIGHWAY  
ISLAMORADA, FL 33036 US

## Name and Address of New Registered Agent:

GREENMAN, FRANKLIN  
5800 OVERSEAS HWY  
SUITE # 40  
MARATHON, FL 33050 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: FRANKLIN GREENMAN

04/29/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MIRANDA BAKER, JILL  
Address: 91500 OVERSEAS HIGHWAY  
City-St-Zip: TAVERNIER, FL 33070

Title: VD ( ) Delete  
Name: BASSETT, KIM  
Address: 3301 OVERSEAS HWY  
City-St-Zip: MARATHON, FL 33050

Title: SD ( ) Delete  
Name: HENRIQUEZ, MICHAEL  
Address: 241 TRUMBO ROAD  
City-St-Zip: KEY WEST, FL 33040

Title: TD ( ) Delete  
Name: DEMOSS, MARLO  
Address: 164 JASMINE STREET  
City-St-Zip: TAVERNIER, FL 33070

Title: D ( ) Delete  
Name: MICHAEL, CUNNINGHAM  
Address: 5800 OVERSEAS HIGHWAY, STE #38  
City-St-Zip: MARATHON, FL 33050

## 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: ( ) 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 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: MICHAEL CUNNINGHAM

D

04/29/2008

Electronic Signature of Signing Officer or Director

Date