

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 03, 2007
Secretary of State

DOCUMENT# N93000001780

Entity Name: KEY WEST BIGHT PRESERVATION ASSOCIATION, INC.**Current Principal Place of Business:**201 WILLIAM STREET
KEY WEST, FL 33040 US**New Principal Place of Business:****Current Mailing Address:**328 SIMONTON
KEY WEST, FL 33040 US**New Mailing Address:****FEI Number:** 65-0415853**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MCGRAIL, PAUL H
328 SIMONTON STREET
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:** T () Delete
Name: MCGRAIL, PAUL
Address: 201 WILLIAM STREET
City-St-Zip: KEY WEST, FL 33040 US**Title:** P () Delete
Name: DIMANDO, SHANE
Address: 100 GRINNELL ST
City-St-Zip: KEY WEST, FL 33040 US**Title:** S () Delete
Name: STROH, TOM
Address: P O BOX 674
City-St-Zip: KEY WEST, FL 33041 US**Title:** D () Delete
Name: AVOLA, CARL
Address: 251 MARGARET ST
City-St-Zip: KEY WEST, FL 33040**Title:** D () Delete
Name: GUNTHER, JEFF
Address: 631 GREENE ST
City-St-Zip: KEY WEST, FL 33040**Title:** D () Delete
Name: PANTELIS, BUCO
Address: 201 WILLIAM ST
City-St-Zip: KEY WEST, FL 33040**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** D (X) Change () Addition
Name: MCGRAIL, PAUL
Address: 201 WILLIAM STREET
City-St-Zip: KEY WEST, FL 33040 US**Title:** D (X) Change () Addition
Name: SCOTT, RONNY
Address: 205 ELIZABETH ST
City-St-Zip: KEY WEST, FL 33040 US**Title:** D (X) Change () Addition
Name: STROH, TOM
Address: P O BOX 674
City-St-Zip: KEY WEST, FL 33041 US**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: PAUL H. MCGRAIL

D

08/03/2007

Electronic Signature of Signing Officer or Director

Date