

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 27, 2007 8:00 am**  
**Secretary of State**

03-27-2007 90015 049 \*\*\*\*61.25

DOCUMENT # N93000005589

1. Entity Name

KEYS EVANGELISTIC MINISTRIES, INC.



Principal Place of Business

1000 COPPIT ROAD  
BIG COPPIT KEY FL 33040

Mailing Address

1000 COPPIT ROAD  
BIG COPPIT KEY FL 33040

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0474478

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WELZIEN, WILLIAM V  
1000 COPPIT RD  
KEY WEST FL 33040

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete  
NAME FRUTH, MARSHANN  
STREET ADDRESS 297 ROTONDA BLVD W  
CITY-STATE-ZIP ROTONDA WEST FL 33947

TITLE ☐ Delete  
NAME VERMEULEN, WILLIAM J  
STREET ADDRESS 6691 ADARIDGE DR SE  
CITY-STATE-ZIP ADA MI 49301

TITLE ☐ Delete  
NAME CERASALE, MARK W  
STREET ADDRESS 1051-A HALSEY DR  
CITY-STATE-ZIP KEY WEST FL 33040

TITLE ☒ Delete  
NAME LEMONS, DAVID  
STREET ADDRESS 4 BAMBOO TERRACE  
CITY-STATE-ZIP KEY WEST FL 33040

TITLE ☐ Delete  
NAME BURRY, PAUL J  
STREET ADDRESS 701 SPANISH MAIN DR LOT 119  
CITY-STATE-ZIP CUDJOE KEY FL 33042

TITLE ☐ Delete  
NAME GRAHAM, ROSS W  
STREET ADDRESS 33 MARSHAM DR  
CITY-STATE-ZIP MARLTON NJ 08053

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Paul J. Burry Treasurer*

2-20-07

305-745-4214