

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003438

FILED  
Feb 18, 2011  
Secretary of State

**Entity Name:** KEY WEST SOUTHERNMOST RUNNERS, INC.

**Current Principal Place of Business:**

1023 WONG SONG ALLEY  
KEY WEST, FL 33040 US

**New Principal Place of Business:**

1112 OLIVIA STREET  
KEY WEST, FL 33040 US

**Current Mailing Address:**

P.O. BOX 5923  
KEY WEST, FL 33045 US

**New Mailing Address:**

**FEI Number:** 65-0501145

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BELL, MARK  
1023 WONG SONG ALLEY  
KEY WEST, FL 33040 US

**Name and Address of New Registered Agent:**

BERTOLINI, DEBRA  
1112 OLIVIA STREET  
KEY WEST, FL 33040 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: DEBRA BERTOLINI

02/18/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DS  
Name: MENTHE, KATE  
Address: 112 OLIVIA STREET  
City-St-Zip: KEY WEST, FL 33040

Title: DS  
Name: SALAZAR, ED  
Address: 3315 DONALD AVE  
City-St-Zip: KEY WEST, FL 33040

Title: DP  
Name: KOCHAN, SUSAN  
Address: 3315 DONALD AVE  
City-St-Zip: KEY WEST, FL 33040

Title: DV  
Name: NELSON, DON  
Address: 23059 REDFISH LANE  
City-St-Zip: CUDJOE KEY, FL 33042

Title: DT  
Name: BERTOLINI, DEBRA  
Address: 1112 OLIVIA STREET  
City-St-Zip: KEY WEST, FL 33040

I hereby 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 all other like empowered.

SIGNATURE: DEBRA BERTOLINI

DT

02/18/2011

Electronic Signature of Signing Officer or Director

Date