

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003445

FILED  
Jan 09, 2012  
Secretary of State

**Entity Name:** KEY WEST UNITED METHODIST CHURCH, INC.

**Current Principal Place of Business:**

600 EATON STREET  
KEY WEST, FL 33040

**New Principal Place of Business:**

**Current Mailing Address:**

600 EATON STREET  
KEY WEST, FL 33040

**New Mailing Address:**

**FEI Number:** 65-0491014

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPOTTSWOOD, WILLIAM B  
500 FLEMING 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: PT  
Name: MICHAUD, DARRELL  
Address: 3609 NORTHSIDE COURT  
City-St-Zip: KEY WEST, FL 33040

Title: T  
Name: ARCHER, WESLEY  
Address: 3227 EAGLE  
City-St-Zip: KEY WEST, FL 33040

Title: T  
Name: FRAGA, DAVID  
Address: 1109 17TH ST  
City-St-Zip: KEY WEST, FL 33040

Title: T  
Name: LEE, WALT  
Address: 3600 NORTHSIDE COURT  
City-St-Zip: KEY WEST, FL 33040

Title: T  
Name: ROBERTS, GENE  
Address: 504A TRUMAN ANNEX  
City-St-Zip: KEY WEST, FL 33040

Title: T  
Name: CARMICHAEL, PAUL  
Address: 466 AIRPORT DRIVE S  
City-St-Zip: SUMMERLAND KEY, FL 33042

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: DARRELL MICHAUD

PT

01/09/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date