

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 03, 2003 8:00 am
Secretary of State

02-03-2003 90033 012 ****61.25

DOCUMENT # N94000004767

1. Entity Name

FLORIDA KEYS FEDERATION OF CHAMBERS OF COMMERCE, INC.



Principal Place of Business

**US HWY ONE, MILE MARKER 31
BIG PINE KEY FL 33043**

Mailing Address

**P O BOX 430083
BIG PINE KEY FL 33043**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2626641**

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

**DAVID, KOLODZIK E
517 HECK AVE
SUMMERLAND KEY FL 33042**

Name **MICHAEL RECKWERDT**

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

7 SUKOSHI LANE

City

ISLAMORADA

FL

Zip Code

33036

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

Michael Reckwerdt

MICHAEL RECKWERDT, PRESIDENT

1-29-03

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DST
FISHER, CAROL A
30465 SOUTH STREET
BIG PINE KEY FL** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DT
CAROL A. FISHER
30465 SOUTH STREET
BIG PINE KEY FL 33043** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
DAVID, KOLODZIK E
517 HECK AVE
LITTLE TORCH KEY FL 33042** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DS
MJ NEEL
929 W 75TH STREET OCEAN
MARATHON FL 33050** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DV
JEFF, WEBB
1304 ALBURY STREET
KEY WEST FL 33040** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
MICHAEL RECKWERDT
7 SUKOSHI LANE
ISLAMORADA FL 33036** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DV
VIRGINIA PANICO
1514 19TH STREET
KEY WEST FL 33040** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Michael Reckwerdt

MICHAEL RECKWERDT

1-29-03

CR2E037 (10/02)