

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005579

FILED
Feb 25, 2012
Secretary of State

Entity Name: SUNRISE ROTARY FOUNDATION OF KEY WEST, INC.

Current Principal Place of Business:

3930 SOUTH ROOSEVELT BLVD, N-407
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2354
KEY WEST, FL 33045

New Mailing Address:

FEI Number: 31-1567369

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORGAN, DOUGLAS
3706-H NO. ROOSEVELT BLVD.
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: S
Name: GRIFFITHS, STEPHANIE
Address: 40 KEY HAVEN RD
City-St-Zip: KEY WEST, FL 33040

Title: D
Name: CALHOUN, BOB
Address: 30320 OVERSEAS HWY
City-St-Zip: BIG PINE KEY, FL 33043

Title: T
Name: RZAD, STANLEY T
Address: PO BOX 776
City-St-Zip: KEY WEST, FL 33041

Title: P
Name: SMITH, JAMES
Address: 25 ALLAMANDA TERRACE
City-St-Zip: KEY WEST, FL 33040

Title: VP
Name: HENSON, STEVE
Address: 1415 ATLANTIC AVE
City-St-Zip: KEY WEST, FL 33040

Title: D
Name: SANDERS, JERRY
Address: 604 TRUMAN AVE
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: STEPHANIE GRIFFITHS

P

02/25/2012

Electronic Signature of Signing Officer or Director

Date