2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2009
Secretary of State

DOCUMENT# N97000006658

Entity Name: KEY LARGO COMMUNITY CHURCH, INC.

Current Principal Place of Business:

10071 N. OVERSEAS HWY.
KEY LARGO, FL 33037

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 286
KEY LARGO, FL 33037

New Mailing Address:

FEI Number: 65-0833169 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HUTCHISON, DAVID G ATT
10071 N. OVERSEAS HWY.
#7
KEY LARGO, FL 33037 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:	PD	( ) Delete
Name:	MITCHELL, ENOS	
Address:	10071 N. OVERSEAS HWY.	
City-St-Zip:	KEY LARGO, FL 33037	
Title:	VPT	( ) Delete
Name:	MITCHELL, ORALEE	
Address:	10071 N. OVERSEAS HWY.	
City-St-Zip:	KEY LARGO, FL 33037	
Title:	CPD	( ) Delete
Name:	WYNN, MARY	
Address:	10071 N. OVERSEAS HWY.	
City-St-Zip:	KEY LARGO, FL 33037	
Title:	SD	( ) Delete
Name:	LUKES, BERNICE	
Address:	10071 N. OVERSEAS HWY.	
City-St-Zip:	KEY LARGO, FL 33037	
Title:	T	( ) Delete
Name:	CLAYTON, ROSIE	
Address:	10071 N. OVERSEAS HWY.	
City-St-Zip:	KEY LARGO, FL 33037	
Title:	FS	( ) Delete
Name:	MITCHELL, ORALEE	
Address:	10071 N. OVERSEAS HWY.	
City-St-Zip:	KEY LARGO, FL 33037	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ORALEE MITCHELL CPD 02/16/2009

Electronic Signature of Signing Officer or Director — Date