## 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N98000000783

Entity Name: NAVY LEAGUE, KEY WEST COUNCIL INC.

FILED Sep 26, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

3930 S ROOSEVELT BL S106 KEY WEST, FL 33040

Current Mailing Address: New Mailing Address:

P.O. BOX 475 KEY WEST, FL 33040 P.O. BOX 475 KEY WEST, FL 33041

NET WEST, TE 30040

FEI Number: 65-0796310 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SAWYER, MARY E 3930 S ROOSEVELT BLVD S106 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: MARY SAWYER

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition Name: GIBSON, BARRY Name: DEMES, RON

Address: 2919 STAPLES AVE Address: 182 VENETIAN WAY
City-St-Zip: KEY WEST, FL 33040 City-St-Zip: SUMMERLAND KEY.

City-St-Zip: KEY WEST, FL 33040 City-St-Zip: SUMMERLAND KEY, FL 33042

Address: 3930 S ROOSEVELT BL S106 Address: 907 FRANCES ST City-St-Zip: KEY WEST, FL 33040 City-St-Zip: KEY WEST, FL 33040

Title: ( ) Delete Title: SEC ( ) Change (X) Addition

Name:Name:DYE, DONNAAddress:Address:17046 ALAMANDA DRCity-St-Zip:City-St-Zip:SUMMMERLAND KEY, FL 33042

Title: ( ) Delete Title: DIR ( ) Change (X) Addition

 Name:
 Name:
 GIBSON, BARRY F

 Address:
 Address:
 2919 STAPLES AVE

 City-St-Zip:
 City-St-Zip:
 KEY WEST, FL 33040

I hereby certify that the information supplied with this filing does not qualify for the 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: BARRY F. GIBSON DIR 09/26/2006