# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2007 08:00 A
Secretary of State

DOCUMENT # N98000000783

1. Entity Name
NAVY LEAGUE, KEY WEST COUNCIL INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 3930 S ROOSEVELT BL<br>S106<br>KEY WEST, FL 33040 | P.O. BOX 475<br>KEY WEST, FL 33041 |

DO NOT WRITE IN THIS SPACE

03112007 No Chg-NP CR2E037 (4/06)

4. FEI Number
65-0796310
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SAWYER, MARY E
3930 S ROOSEVELT BLVD S106
KEY WEST, FL 33040

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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: _____ DATE:
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when executing)

**Filing Fee is $61.25**
**Due by May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|---|---|
| TITLE | P |
| NAME | DEMES, RON |
| STREET ADDRESS | 182 VENETIAN WAY |
| CITY-ST-ZIP | SUMMERLAND KEY, FL 33042 |
| TITLE | TREA |
| NAME | JOHNS, GIDGET |
| STREET ADDRESS | 907 FRANCES ST |
| CITY-ST-ZIP | KEY WEST, FL 33040 |
| TITLE | SEC |
| NAME | DYE, DONNA |
| STREET ADDRESS | 17046 ALAMANDA DR |
| CITY-ST-ZIP | SUMMMERLAND KEY, FL 33042 |
| TITLE | DIR |
| NAME | GIBSON, BARRY F |
| STREET ADDRESS | 2919 STAPLES AVE |
| CITY-ST-ZIP | KEY WEST, FL 33040 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

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03/27/07-80036-006 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:** _____ 3.12.07 3052947029
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #