

**2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Nov 08, 2011**  
**Secretary of State**

DOCUMENT# N98000006870

**Entity Name:** KEY WEST INDEPENDENT EDUCATION, INC.**Current Principal Place of Business:**5901 COLLEGE ROAD  
A130  
KEY WEST, FL 33040**New Principal Place of Business:****Current Mailing Address:**5901 COLLEGE ROAD  
A130  
KEY WEST, FL 33040**New Mailing Address:****FEI Number:** 65-0915399**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**PELLON, MARIA E  
3330 NORTHSIDE DR  
412  
KEY WEST, FL 33040 US**Name and Address of New Registered Agent:**SMITH, WAYNE  
333 FLEMING ST  
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: WAYNE LARUE SMITH

11/08/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:****Title:** PRES  
**Name:** DEMENT, WINNIE  
**Address:** 909 16TH TERRACE  
**City-St-Zip:** KEY WEST, FL 33040 US**Title:** VP  
**Name:** NEDIN, LEYLA  
**Address:** 940 LOGGERHEAD LN  
**City-St-Zip:** SUGARLOAF KEY, FL 33042 US**Title:** SEC  
**Name:** GROOMES-DAVIS, CARRIE  
**Address:** 718 OLIVIA STREET  
**City-St-Zip:** KEY WEST, FL 33040 US**Title:** TRES  
**Name:** CAROLYN, ROBERTS  
**Address:** 29911 JOURNEY'S END RD  
**City-St-Zip:** BIG PINE KEY, FL 33043 US**Title:** MBR  
**Name:** NADIA, HALL  
**Address:** 22977 REDFISH LANE  
**City-St-Zip:** CUDJOE KEY, FL 33042 US**Title:** EXEC  
**Name:** S. ASHLEY, ROBERTS  
**Address:** 429 CAROLINE ST  
**City-St-Zip:** KEY WEST, FL 33040 US

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: WINNIE DEMENT

PRES

11/08/2011

Electronic Signature of Signing Officer or Director

Date