## 2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

-	MENT # N9900000		frus n .						
1. Entity Name KEY WEST FILM SOCIETY, INC.						07		•	
Principal Place of Business 416 EATON ST. KEY WEST, FL 33040		Mailing Address P.O. BOX 1283 KEY WEST, FL 33041					JUN II, P ARASSEF.		
Principal Place of Business - No P.O. Box #     3. Mailing Address									
Suite, Apt. #, etc.		Suite, Apt. #, etc.				06132007	Chg-NP	CR2E037 (12/0	3)
City & Stat	е	City & State				4. FEI Number 65-0903			Applied For Not Applicable
Zip	Country	Zip	Zip Cou		5. Certificate of Stat		of Status Desired	ER 75 Additional	
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Agent					
KRUER, WAYNE 600 WHITEHEAD STREET KEY WEST, FL 33040				Name Street Address (P.O. Box Number is Not Acceptable)					
				City	<del></del>		<u></u>	FL Zip C	Code
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									
9. Election Campaign Fi Amended AR is \$61.25  7rust Fund Contribute					0	\$5.00 May Be Added to Fees		lake check payabl rida Department o	
10.	OFFICERS AND DI		11.		-	ADDITIONS/CHA	NGES TO OFFICE	RS AND DIRECTORS	
NAME STREET ADDRESS CITY-ST-ZIP	D KRUER, WAYNE 1105 THOMAS ST KEY WEST, FL 33040	☐ Delate		:	1800	ew Helmerich Atlantic Blvd. /est, FL 3304		☐ Chan	ge X] Addition
NAME STREET ADDRESS CITY-ST-ZIP	TD COOPER, GEORGE 1100 FLAGLER AVE. KEY WEST, FL 33040	□ Dekete		et address	– . –	Corns Duncan St. Fest FI 33040		☐ Chan	ge X Addition
TITLE NAME STREET ADDRESS CITY-SI-ZIP	IRICK, K.C. NA 1421 FIRST ST ST			ET ADORESS		Goyal Sunrise Lane Jest FL 33040	)	☐ Chan	ge X Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARPER, JEAN 1500 VON PHISTER ST. KEY WEST, FL 33040	X Delete		ET AOORESS	723 W	Daykin findsor Lane /est Fl 33040		☐ Chan	ge 🗶 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SLATER, MARK 712 LOVE LANE KEY WEST, FL 33040	☐ Delete				3.C 06/18	<b>90104</b> 7070107	□ Chan 520403 3004 **6	<u> </u>
TITLE NAME STREET ADDRESS CETY-ST-ZIP		☐ Delete	CITY	ET ADORESS -ST-ZIP				☐ Chan	
12. I hereby certify that the information supplied with this filling 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:									
SIGNATURE: SIGNATURE: Date Department of against difference on director Date Department of Date Date Date Date Date Date Date Date									

26/14