

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 383345

FILED
Jan 16, 2006
Secretary of State

Entity Name: CENTRAL KEYS DEVELOPMENT CORP.

Current Principal Place of Business:

82905 US HWY 1
P.O. BOX 324
ISLAMORADA, FL 33036

New Principal Place of Business:

Current Mailing Address:

82905 US HWY 1
P.O. BOX 324
ISLAMORADA, FL 33036

New Mailing Address:

FEI Number: 59-1401562 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOUGNERTY, M. KAY
218 MATECUMBE AVE
ISLAMORADA, FL 33036 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ALLENWOOD, RICHARD JR
Address: 192 SO AIRPORT ROAD
City-St-Zip: TAVERNIER, FL 33070

Title: VP () Delete
Name: DOUGNERTY, M. KAY
Address: 218 MATECUMBE AVE
City-St-Zip: ISLAMORADA, FL 33036

Title: S () Delete
Name: WOOD, JANET L
Address: 216 SO AIRPORT ROAD
City-St-Zip: TAVERNIER, FL 33070

Title: T () Delete
Name: WOOD, JAMES
Address: 11621 US HIGHWAY 301
City-St-Zip: HAWTHORNE, FL 32640

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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: M KAY DOUGHERTY

VP

01/16/2006

Electronic Signature of Signing Officer or Director

_____ Date