


2005 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Aug 17, 2005 08:00 AM
Secretary of State

DOCUMENT # F96000002822

1. Entity Name
 KEY WEST FLORIDA HOTEL CORP.



Principal Place of Business 14185 DALLAS PARKWAY 1150 DALLAS, TX 75254	Mailing Address 14185 DALLAS PARKWAY 1150 DALLAS, TX 75254
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06292005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0667008	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
 1201 HAYS STREET
 SUITE 105
 TALLAHASSEE, FL 32301

DO NOT WRITE IN THIS SPACE

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 reinstating)

FILE NOW!!! FEE IS \$550.00
Due by September 7, 2005

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FISHER, RICHARD L 299 PARK AVENUE NEW YORK, NY 10017
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD EDELMAN, MARTIN L 280 PARK AVENUE NEW YORK, NY 10017
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT KIMICHIK, DAVID 14185 DALLAS PARKWAY DALLAS, TX 75254
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BROOKS, DAVID A 14185 DALLAS PARKWAY DALLAS, TX 75254
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LELAND, MARC 1001 19TH STREET N ARLINGTON, VA 22209
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BENNETT, MONTY 14185 DALLAS PARKWAY DALLAS, TX 75254

DO NOT WRITE IN THIS SPACE

100000376590
 08/17/05-80003-005 550.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(9)(f), 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 607, 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: Monty Bennett 7/27/05 922-778-9271

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #