

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 02, 2004
Secretary of State**

DOCUMENT# N00000004358

Entity Name: STUDIO KEY WEST, INC.

Current Principal Place of Business:

302 SOUTHARD ST
SUITE 104
KEY WEST, FL 33040 US

New Principal Place of Business:

501 WHITEHEAD STREET
KEY WEST, FL 33040 US

Current Mailing Address:

302 SOUTHARD ST
SUITE 104
KEY WEST, FL 33040 US

New Mailing Address:

501 WHITEHEAD STREET
KEY WEST, FL 33040 US

FEI Number: 65-1027998 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENDERSON, ANN
302 SOUTHARD ST
SUITE 104
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

HENDERSON, ANN
501 WHITEHEAD STREET
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: ANN HENDERSON 03/02/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BUDDINGER, WILLIAM
Address: 504 NOAH LANE
City-St-Zip: KEY WEST, FL 33040

Title: VPD () Delete
Name: BUDDINGER, PEYTON
Address: 504 NOAH LANE
City-St-Zip: KEY WEST, FL 33040

Title: TD () Delete
Name: HENDERSON, ANN
Address: 302 SOUTHARD ST SUITE 104
City-St-Zip: KEY WEST, FL 33040

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BUDINGER, WILLIAM
Address: 504 NOAH LANE
City-St-Zip: KEY WEST, FL 33040

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: HENDERSON, ANN
Address: 501 WHITEHEAD STREET
City-St-Zip: KEY WEST, FL 33040

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANN HENDERSON TD 03/02/2004
Electronic Signature of Signing Officer or Director Date