



04-28-2004 90303 014 \*\*\*150.00

**2004 CORPORATION ANNUAL REPORT**

<b>DOCUMENT # N08000009343</b> 1. Entity Name <b>NORTH KEY LARGO UTILITY CORP.</b>					
Principal Place of Business <b>24 DOCKSIDE LANE #512          KEY LARGO, FL 33037</b>		Mailing Address <b>24 DOCKSIDE LANE #512          KEY LARGO, FL 33037</b>			
2. Principal Place of Business <b>35 Ocean Reef Drive</b> <small>Suite, Apt. #, etc.</small> <b>Suite 220</b> <small>City &amp; State</small> <b>Key Largo, FL</b>		3. Mailing Address <small>Suite, Apt. #, etc.</small>  <small>City &amp; State</small>  <small>City &amp; State</small>  <small>Zip</small> <small>Country</small> <b>33037</b> <b>USA</b>			
4. FEI Number <b>65-0545336</b>		Chg-P      CR2E034 (10/03)		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>			
6. Name and Address of Current Registered Agent <b>JENKINS, JOHN R P.A.          ROSE, SUNDBSTROM &amp; BENTLEY          2548 BLAIRSTONE PINES DR.          TALLAHASSEE, FL 32301</b>			7. Name and Address of New Registered Agent <small>Name</small>  <small>Street Address (P.O. Box Number is Not Acceptable)</small>  <small>City</small> <b>FL</b> <small>Zip Code</small>		
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<b>CD</b> <b>GOLDSTEIN, ALAN J</b> <b>5 CANNON POINT</b> <b>KEY LARGO, FL 33037</b>	<input type="checkbox"/> Delete	<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<b>D</b> <b>Monk, Albert</b> <b>24 Marina Village Unit B</b> <b>Key Largo, FL 33037</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<b>P</b> <b>RITZ, DAVID C</b> <b>24 DOCKSIDE LANE, PMB 505</b> <b>KEY LARGO, FL 33037</b>	<input type="checkbox"/> Delete	<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<b>D</b> <b>Smith, Mike</b> <b>01 Sunrise Cay Drive</b> <b>Key Largo, FL 33037</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<b>D</b> <b>MILLER, RICHARD</b> <b>09 BAY RIDGE ROAD</b> <b>KEY LARGO, FL 33037</b>	<input type="checkbox"/> Delete	<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<b>D</b> <b>Heffner, Samuel</b> <b>30 East Snapper Point Drive</b> <b>Key Largo, FL 33037</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<b>D</b> <b>ASTBURY, PAUL</b> <b>31 OCEAN REEF DR., #C300</b> <b>KEY LARGO, FL 33037</b>	<input type="checkbox"/> Delete	<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<b>D</b> <b>Jacobson, Patty</b> <b>52 Angelfish Cay Drive</b> <b>Key Largo, FL 33037</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<b>D</b> <b>HOWARD, RICK</b> <b>23 DISPATCH CREEK CT</b> <b>KEY LARGO, FL 33037</b>	<input type="checkbox"/> Delete	<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>		<input type="checkbox"/> Change <input type="checkbox"/> Addition
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<b>D</b> <b>GILBERT, BRUCE</b> <b>23 TAMARIND LANE</b> <b>KEY LARGO, FL 33037</b>	<input type="checkbox"/> Delete	<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify 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 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.					
<b>SIGNATURE: <u>David C Ritz</u> David C Ritz, President 4-13-04 305-367-3067</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> <small>Date</small> <small>Daytime Phone #</small>					