2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N93000003265

Entity Name: KEY CENTER FOUNDATION, INC.

FILED Feb 06, 2003 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
1315 NOR	ER V. COLE TH VANNOR), FL 3466197				
Current M	lailing Addre	ss:	New Mailing Address:		
130 HEIGH INVERNES	HTS AVE SS, FL 34452	4571 US			
FEI Number	: 59-3200079	FEI Number Applied For()	FEI Number Not Applicable () Certificate of S	Status Desired (X)	
Name and	l Address of	Current Registered Agent	Name and Address of New Registere	ed Agent:	
COLE, CH 1315 NOR LECANTO	IESTER V TH VANNOR 9, FL 3466197	WICK ROAD 10 US			
	named entity e of Florida.	submits this statement for t	ne purpose of changing its registered office or registe	ered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered	Agent Date		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS	
Title: Name: Address: City-St-Zip:	WHITTON JR. 4930 N. MAPL		Title: () Change () Add Name: Address: City-St-Zip:	ition	
Title: Name: Address: City-St-Zip:	COLE, CHEST	ORTWICK ROAD	Title: () Change () Add Name: Address: City-St-Zip:	ition	
Title: Name: Address: City-St-Zip:	HUPP, IRENE N. HWY 19 P.		Title: () Change () Add Name: Address: City-St-Zip:	ition	
Title: Name: Address: City-St-Zip:	JOYNER, SAN E. HWY 44 P.		Title: () Change () Add Name: Address: City-St-Zip:	ition	
Title: Name: Address: City-St-Zip:	D (ARMSTRONG 58 N ROBINHO INVERNESS,	DOD RD	Title: D (X) Change () Add Name: THURMAN, KAREN Address: 9067 SW BLUE RUN DRIVE City-St-Zip: DUNNELLON, FL 34432 US	ition	
Title: Name: Address:	VP (DODGE, EDW 8581 F SWEE		Title: () Change () Add Name: Address:	ition	

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.

City-St-Zip:

SIGNATURE: B.M. WHITTON, JR. P 02/06/2003

INVERNESS, FL 344507300 US

City-St-Zip: