


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 02, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # P04000052573  
 1. Entity Name  
 FRANDY OF KEY WEST, INC.



Principal Place of Business  
 381 WEST INDIES DRIVE  
 RAMROD KEY, FL 33042

Mailing Address  
 381 WEST INDIES DRIVE  
 RAMROD KEY, FL 33042

**DO NOT WRITE IN THIS SPACE**



04302008 No Chg-P CR2E034 (11/05)

4. FEI Number 55-0861830	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

GELMAN, ANDREW J  
 381 WEST INDIES DRIVE  
 RAMROD KEY, FL 33042

**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: Andrew Gelman DATE: 4/30/2008

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

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

U00000942820  
 05/29/08-80033-017 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	GELMAN, ANDREW J
STREET ADDRESS	381 WEST INDIES DRIVE
CITY-ST-ZIP	RAMROD KEY, FL 33042
TITLE	VP
NAME	GELMAN, FRANCINE S
STREET ADDRESS	381 WEST INDIES DRIVE
CITY-ST-ZIP	RAMROD KEY, FL 33042
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Andrew Gelman Andrew Gelman 4/30/2008 305 296 8269

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