

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000062207

FILED  
Mar 23, 2011  
Secretary of State

Entity Name: KEY WEST CASINO TWO, INC.

## Current Principal Place of Business:

2435 MONTPELIER ROAD  
PUNTA GORDA, FL 33983

## New Principal Place of Business:

502 B KING STREET  
PUNTA GORDA, FL 33983

## Current Mailing Address:

2435 MONTPELIER ROAD  
PUNTA GORDA, FL 33983

## New Mailing Address:

FEI Number: 27-3175487      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

## Name and Address of New Registered Agent:

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

## OFFICERS AND DIRECTORS:

Title: D  
Name: STOKEN, RAYMOND G  
Address: 2435 MONTPELIER ROAD  
City-St-Zip: PUNTA GORDA, FL 33983

Title: D  
Name: MOLINARI, JOHN R  
Address: 2435 MONTPELIER ROAD  
City-St-Zip: PUNTA GORDA, FL 33983

Title: CEOP  
Name: STOKEN, GARY J  
Address: 2435 MONTPELIER ROAD  
City-St-Zip: PUNTA GORDA, FL 33983

Title: ST  
Name: STOKEN, MELANIE G  
Address: 2435 MONTPELIER ROAD  
City-St-Zip: PUNTA GORDA, FL 33983

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MELANIE G. STOKEN

ST

03/23/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date