

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000026223

FILED
Aug 08, 2006
Secretary of State

Entity Name: KEYS FURNITURE NOW, INC.

Current Principal Place of Business:

1757 OVERSEAS HWY
MARATHON, FL 33050

New Principal Place of Business:

Current Mailing Address:

1429 N. KROME AVE
% FURNITURE NOW
FLORIDA CITY, FL 33034 US

New Mailing Address:

FEI Number: 90-0106974 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELWELL, ROSS
1757 OVERSEAS HWY
MARATHON, FL 33050 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ELWELL, ROSS
Address: 1757 OVERSEAS HWY
City-St-Zip: MARATHON, FL

Title: STD () Delete
Name: ELWELL, JANICE
Address: 1757 OVERSEAS HWY
City-St-Zip: MARATHON, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ROSS ELWELL

PD

08/08/2006

Electronic Signature of Signing Officer or Director

_____ Date