

FILED
Jun 16, 2003 8:00 am
Secretary of State

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05-02-2003 90381 033 ***150.00

**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 569624 1. Entity Name SHIRT FACTORY INTERNATIONAL OF KEY WEST, INC.			
Principal Place of Business 90 CRUICKSHANK LN CUDJOE KEY, FL 33042 US		Mailing Address 90 CRUICKSHANK LN CUDJOE KEY, FL 33042 US	
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address 1147 County Rd 281 Suite, Apt. #, etc. Woodland Park, Co 80863 USA 	
4. FEI Number 50-1821890		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent VICKERY, BRIAN K 90 CRUICKSHANK LN CUDJOE KEY, FL 33042		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 1147 County Rd 281 Woodland Park, Co 80863	
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 		DATE 4/28/03	
9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P NAME VICKERY, BRIAN K STREET ADDRESS 90 CRUICKSHANK LN CITY-ST-ZIP CUDJOE KEY, FL	☐ Delete	TITLE 1147 County Rd 281 STREET ADDRESS Woodland Park, Co CITY-ST-ZIP 80863	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Change ☐ 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 title are possessed.			
SIGNATURE:		Date: 4/28/03 305-743-5189	

55048707

Brian K. Vickery
 Pres.

719-310-4202