## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

## **DOCUMENT # 626678**

1. Entity Name

FLORIDA KEYS HARBOR SERVICE, INC.



**FILED** Jan 30, 2004 08:00 AM-Secretary of State

Principal Place of Business

700 FRONT STREET KEY WEST, FL 33040 Mailing Address

#3 ALLAMANDA TERR KEY WEST, FL 33040

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01202004

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-0167485

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

FELTON, JAMES E., JR. 700 FRONT STREET KEY WEST, FL 33040

## 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.

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, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS 10. TITLE NAME FELTON, JAMES E., JR. STREET ADDRESS 700 FRONT STREET KEY WEST, FL CITY-ST-ZIP vs TITLE NAME FELTON, DIANE STREET ADDRESS 700 FRONT STREET CITY-ST-ZIP KEY WEST, FL TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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## DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filling 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 like empowered.

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP