2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2004
Secretary of State

DOCUMENT# F03000001311

Entity Name: AEGIS KEY CORP.

Current Principal Place of Business:

5300 ALLEN K BREED HWY.
LAKELAND, FL 33811

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 33050
LAKELAND, FL 338073050

New Mailing Address:

5300 ALLEN K. BREED HWY.
LAKELAND, FL 33811

FEI Number: 01-0730876 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
526 E PARK AVENUE
TALLAHASSEE, FL 32301 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: BROCKMAN, KEITH
Address: 5300 ALLEN K BREED HWY
City-St-Zip: LAKELAND, FL 33811

Title: SD ( ) Delete
Name: GUPTILL, LIZANNE
Address: 5300 ALLEN K BREED HWY
City-St-Zip: LAKELAND, FL 33811

Title: T ( ) Delete
Name: SALTARELLI, ROBERT
Address: 5300 ALLEN K BREED HWY
City-St-Zip: LAKELAND, FL 33811

Title: C ( ) Delete
Name: BOYD, STUART D
Address: 5300 ALLEN K BREED HWY
City-St-Zip: LAKELAND, FL 33811

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: WOLF, TOM
Address: 5300 ALLEN K BREED HWY
City-St-Zip: LAKELAND, FL 33811

Title: S (X) Change ( ) Addition
Name: GUPTILL, LIZANNE
Address: 5300 ALLEN K BREED HWY
City-St-Zip: LAKELAND, FL 33811

Title: T (X) Change ( ) Addition
Name: ASKINS, KATHI
Address: 5300 ALLEN K BREED HWY
City-St-Zip: LAKELAND, FL 33811

Title: D (X) Change ( ) Addition
Name: BOYD, STUART D
Address: 5300 ALLEN K BREED HWY
City-St-Zip: LAKELAND, FL 33811

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LIZANNE GUPTILL S 04/06/2004

Electronic Signature of Signing Officer or Director Date