

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005999

FILED
Apr 20, 2009
Secretary of State

Entity Name: KEY GOVERNMENT FINANCE, INC.

Current Principal Place of Business:

1000 S. MCCASLIN BLVD
SUPERIOR, CO 80027

New Principal Place of Business:

LEGAL DEPARTMENT
1000 S. MCCASLIN BLVD
SUPERIOR, CO 80027

Current Mailing Address:

1000 S. MCCASLIN BLVD
ATTN: LEGAL DEPARTMENT
SUPERIOR, CO 80027

New Mailing Address:

LEGAL DEPT.
1000 S. MCCASLIN BLVD.
SUPERIOR, CO 80027

FEI Number: 20-0259892

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: PRES () Delete
Name: WARNER, ADAM D
Address: 3075 HIGHLAND PARKWAY
City-St-Zip: DOWNERS GROVE, IL 60515

Title: CFO () Delete
Name: TINNON, RICHARD M
Address: 1000 S. MCCASLIN BLVD
City-St-Zip: SUPERIOR, CO 80027

Title: SEC () Delete
Name: EARLY, JEANNE L
Address: 1000 S. MCCASLIN BLVD
City-St-Zip: SUPERIOR, CO 80027

Title: DIR () Delete
Name: WARNER, ADAM D
Address: 3075 HIGHLAND PARKWAY
City-St-Zip: DOWNERS GROVE, IL 60515

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: WARNER, ADAM D
Address: 1000 S. MCCASLIN BLVD.
City-St-Zip: SUPERIOR, CO 80027

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

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

Title: DIR (X) Change () Addition
Name: WARNER, ADAM D
Address: 1000 S. MCCASLIN BLVD.
City-St-Zip: SUPERIOR, CO 80027

I hereby certify that the information supplied with this filing does not qualify 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: JEANNE L. EARLY

SEC

04/20/2009

Electronic Signature of Signing Officer or Director

_____ Date