2007 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # F03000006021

1. Entity Name
KEYS UNLIMITED, INC.

Principal Place of Business	Mailing Address
7 GURNET SHORE	P.O. BOX 1764
BRUNSWICK, ME 04011	MARATHON, FL 33050

DO NOT WRITE IN THIS SPACE

04152007   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
01-0507309	Not Applicable

5. Certificate of Status Desired   ☒   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

WOLFE, JOHN J
2955 OVERSEAS HIGHWAY
MARATHON, FL 33050

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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)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution.   ☐   **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	CPT
NAME	COFFIN, HEIDI
STREET ADDRESS	7 GURNET SHORE
CITY-ST-ZIP	BRUNSWICK, ME 04011

TITLE	VCV
NAME	COFFIN, JOHN
STREET ADDRESS	7 GURNET SHORE
CITY-ST-ZIP	BRUNSWICK, ME 04011

TITLE	C
NAME	HOWARD, CLAYTON N
STREET ADDRESS	1 MAIN STREET
CITY-ST-ZIP	DAMARISCOTTS, ME 04543

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

-TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/01/07-80108-024 158.75

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE: _John Coffin_   4/13/07   751-2551
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #