

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 04, 2004 8:00 am
Secretary of State

02-04-2004 90067 024 ***150.00

DOCUMENT # G02623
 1: Entity Name
KEY-ROS CORPORATION



Principal Place of Business
 1810 HYPOLUXO RD
 D-3
 LAKE WORTH FL 33462

Mailing Address
 P O BOX 8146
 LANTANA FL 33465

29007000



MOORE CR2E034 (11/03)

2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

4. FEI Number **04-2463539**
 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
KEDDY, DONALD G.
12990 CALAIS CIRCLE
PALM BEACH GARDENS FL 33410

7. Name and Address of New Registered Agent
 Name **DONALD G KEDDY**
 Street Address (P.O. Box Number is Not Acceptable)
11373 TWELVE OAKS WAY
 City **NORTH PALM BEACH** FL Zip Code **33408**

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 **DONALD B. KEDDY** *Donald G Keddy* **2-2-04**
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, 2004 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	KEDDY, DONALD G.	
STREET ADDRESS	11373 TWELVE OAKS WAY	
CITY-ST-ZIP	NORTH PALM BEACH FL 33408	
TITLE	ST	<input type="checkbox"/> Delete
NAME	KEDDY, HELENA	
STREET ADDRESS	11373 TWELVE OAKS WAY	
CITY-ST-ZIP	NORTH PALM BEACH FL 33408	
TITLE	P	<input type="checkbox"/> Delete
NAME	COFFEY, DORI	
STREET ADDRESS	128 SPRINGLINE DRIVE	
CITY-ST-ZIP	VERO BEACH FL 32963	
TITLE	D	<input type="checkbox"/> Delete
NAME	COFFEY, DOUGLAS	
STREET ADDRESS	128 SPRINGLINE DRIVE	
CITY-ST-ZIP	VERO BEACH FL 32963	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 like empowered.

SIGNATURE: *Donald G. Keddy* **DONALD G. KEDDY** **2-2-04** **567-586-4273**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #