

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

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

05-04-2004 90120 008 ***150.00

DOCUMENT # J32346

1. Entity Name
FLETCHER ON DUVAL OF KEY WEST, INC.



Principal Place of Business

% WILLIAM KENNETH RICHARDSON
1024 DUVAL ST.
KEY WEST, FL 33040

Mailing Address

% WILLIAM KENNETH RICHARDSON
1024 DUVAL ST.
KEY WEST, FL 33040



04272004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2751204

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

RICHARDSON, WILLIAM KENNETH
1024 DUVAL ST.
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)

DATE

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**

10. OFFICERS AND DIRECTORS

TITLE	PVS
NAME	RICHARDSON, WILLIAM K.
STREET ADDRESS	1024 DUVAL STREET
CITY-ST-ZIP	KEY WEST, FL
TITLE	TD
NAME	RICHARDSON, WILLIAM K.
STREET ADDRESS	1024 DUVAL 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	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

PRESIDENT:

30 APR 04

WILLIAM KENNETH RICHARDSON

305 799 0400