2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## **FILED** ANNUAL REPORT (AR) Apr 05, 2007 08:00 Al Secretary of State DOCUMENT # J73453 1. Entity Name KEYBRIDGE REALTY, INC. Principal Place of Business Mailing Address 240 NORTH WASHINGTON BLVD 240 NORTH WASHINGTON BLVD SUITE 311 SUITE 311 SARASOTA FL 34236-5929 SARASOTA FL 34236-5929 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State 4. FEI Numbor City & State Applied For 59-2808061 Not Applicable Ζıρ Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RUGGLES, ROBERT K. III Street Address (P.O. Box Number is Not Acceptable) 240 NO. WASHINGTON BLVD SUITE 311 SARASOTA FL 33577 Zip Code 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 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete THLE Change ☐ Addition RUGGLES, ROBERT K. III NAME NAME 240 NO. WASHINGTON BLVD STREET ADDRESS STREET ADDRESS SARASOTA FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete ☐ Change ☐ Addition U00000691238 NAME 04/13/07-80002-023 150.00 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CtTY-ST-ZIP TITLE ☐ Delete Сhange ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY- ST-7IP HILE Change Delete THILE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY+ST-ZIP ☐ Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7/P TITLE Delete IIIL ☐ Addition NAME. STREET ADDRESS STREET ADDRESS CUTY - ST - ZIP CITY-ST-ZIP 12. I horoby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or suppliemental report is true and accurate and that my signature shall have the same legal effect as if made under early; 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: RUT N 2 ROBOT K Ruggle - To Procide + 3/3//07 94/-955-8338