

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K20883

Entity Name: COMMODORE KEY, INC.

FILED  
Apr 26, 2009  
Secretary of State

## Current Principal Place of Business:

% ROMY Z. LANCASTER  
% K. M. LANCASTER 50 W MASHTA DR. STE 6  
KEY BISCAYNE, FL 331492431 US

## Current Mailing Address:

% ROMY Z. LANCASTER  
% K. M. LANCASTER 50 W MASHTA DR. STE 6  
KEY BISCAYNE, FL 331492431 US

## New Principal Place of Business:

% RICHARD A. REED  
% LANCASTER & REED, 50 W MASHTA DR., STE 6  
KEY BISCAYNE, FL 33149 US

## New Mailing Address:

% RICHARD A. REED  
% LANCASTER & REED, 50 W MASHTA DR., STE 6  
KEY BISCAYNE, FL 33149 US

FEI Number: 65-0246664

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LANCASTER, ROMY Z  
% KENNETH M. LANCASTER, CPA, P.A.  
50 WEST MASHTA DR., SUITE 6  
KEY BISCAYNE, FL 331492431 US

## Name and Address of New Registered Agent:

REED, RICHARD A CPA  
% LANCASTER & REED, LLC  
50 WEST MASHTA DR., SUITE 6  
KEY BISCAYNE, FL 331492431 US

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: RICHARD REED

04/26/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: PETRINI, RINALDO  
Address: 50 WEST MASHTA DRIVE, SUITE 6  
City-St-Zip: KEY BISCAYNE, FL 331492431

Title: VPD ( ) Delete  
Name: PETRINI, PATRICIA E  
Address: 50 WEST MASHTA DRIVE, SUITE 6  
City-St-Zip: KEY BISCAYNE, FL 331492431

Title: STD ( ) Delete  
Name: PETRINI, ESTELA  
Address: 50 WEST MASHTA DRIVE, SUITE 6  
City-St-Zip: KEY BISCAYNE, FL 331492431

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: RINALDO PETRINI

PD

04/26/2009

Electronic Signature of Signing Officer or Director

Date