


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 10, 2006 08:00 AM
Secretary of State

DOCUMENT # K47640 1. Entity Name KEY-TEMPS, INC.	
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Principal Place of Business 2830 WINKLER AVE., SUITE 104 FT. MYERS, FL 33916	Mailing Address 2830 WINKLER AVE., SUITE 104 FT. MYERS, FL 33916
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DO NOT WRITE IN THIS SPACE



07072006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0093469	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MILLS, DAVID
 14580 HEAD WATER BAY LN
 FORT MYERS, FL 33908

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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 _____ (NOTE: Registered Agent signature required when reinstating)

U00000569144
 07/11/06-20114-001 150.00
DATE

FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS MILLS, DAVID 14580 HEADWATER BAY LN FORT MYERS, FL 33908
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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: DAVID MILLS *President* 7-7-06 239-278-1515
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #