


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 12, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L69513</b> 1. Entity Name KEY EIGHT, INC.	
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Principal Place of Business 1385 N BRANDYWINE CIRCLE FT MYERS, FL 33919 US	Mailing Address 1385 N BRANDYWINE CIRCLE FT MYERS, FL 33919 US
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01132004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-0225323	Applied For Not Applicable
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

GLADYS A. FIELDS  
1385 N BRANDYWINE CIRCLE  
FT MYERS, FL 33919

**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

U000000048023  
02/12/04-80064-005 150.00

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BEATTY, JOSEPH 16041 KELLY WOODS DR FT MYERS, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COOK, CHARLES 8401 ESTERO BLVD FT MYERS, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FIELDS, CHARLES 1385 N BRANDYWINE CIRCLE FORT MYERS, FL 33919
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COOK, JOHN 11234 US 20 MIDDLEBURY, IN
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST GLADYS A. FIELDS 1385 N BRANDYWINE CIRCLE FORT MYERS, FL 33919
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)(l), 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:** *Gladys A. Fields*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

*2/12/04*

Daytime Phone #

*239-481-0374*