

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M36755

FILED
Jan 16, 2008
Secretary of State

Entity Name: KEY WEST ENGINE SERVICE, INC.

Current Principal Place of Business:

6991 SHRIMP ROAD
STOCK ISLAND, FL 33040 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 2521
PO BOX 2521
KEY WEST, FL 33045 US

New Mailing Address:

FEI Number: 59-2701646 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COTTIS, JOHN N., JR
6991 SHRIMP ROAD
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: COTTIS, JOHN N., JR.,
Address: 17258 DOLPHIN ST.
City-St-Zip: SUGARLOAF SHORES, FL 33042

Title: VD () Delete
Name: PACINI, TOM
Address: 490 AVE C
City-St-Zip: KEY WEST, FL

Title: SD () Delete
Name: ERICKSON, CELESTE,
Address: 2315 ROOSEVELT BLVD.
City-St-Zip: KEY WEST, FL

Title: T () Delete
Name: RUDOLF, STEVE
Address: 27335 BARBUDA LN.
City-St-Zip: RAMROD KEY, FL 33042

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:

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: JOHN COTTIS

PTD

01/16/2008

Electronic Signature of Signing Officer or Director

_____ Date