

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008535

FILED
Apr 26, 2005
Secretary of State

Entity Name: KEY WEST VINEYARD, INC.

Current Principal Place of Business:

701 SPANISH MAIN DR #117
CUDJOE KEY, FL 33042

New Principal Place of Business:

2523 US HWY 27 S
AVON PARK, FL 33825

Current Mailing Address:

701 SPANISH MAIN DR #117
CUDJOE KEY, FL 33042

New Mailing Address:

2104 SEAVIEW ST
SEBRING, FL 33870

FEI Number: 52-2286755

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOLTMAN, WM G
701 SPANISH MAIN DR #117
CUDJOE KEY, FL 33042 US

Name and Address of New Registered Agent:

WOLTMAN, WM G
2104 SEAVIEW ST
SEBRING, FL 33870 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:

04/26/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WOLTMAN, WM G
Address: 701 SPANISH MAIN DR #117
City-St-Zip: CUDJOE KEY, FL 33042

Title: D () Delete
Name: WOLTMAN, PATRICIA L
Address: 701 SPANISH MAIN DR #117
City-St-Zip: CUDJOE KEY, FL 33042

Title: D () Delete
Name: RANDALL, GAY W
Address: 200 WOODFERN
City-St-Zip: ANDERSON, SC 29625 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WOLTMAN, WM G
Address: 2104 SEAVIEW ST.
City-St-Zip: SEBRING, FL 33870

Title: D (X) Change () Addition
Name: WOLTMAN, PATRICIA L
Address: 2104 SEAVIEW ST.
City-St-Zip: SEBRING, FL 33870

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PATRICIA L. WOLTMAN

D

04/26/2005

Electronic Signature of Signing Officer or Director

Date