

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000001783

FILED
Jul 13, 2003
Secretary of State

Entity Name: LOWER KEYS PIN-TO-WIN INC.

Current Principal Place of Business:

16606 HOLLY LANE
SUGARLOAF KEY, FL 33042 US

New Principal Place of Business:

3965 HALL ROAD
BIG PINE KEY, FL 33043 US

Current Mailing Address:

16606 HOLLY LANE
SUGARLOAF KEY, FL 33042 US

New Mailing Address:

3965 HALL ROAD
BIG PINE KEY, FL 33043 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NUNN, WENDY G
16606 HOLLY LANE
SUGARLOAF KEY, FL 33042 US

Name and Address of New Registered Agent:

SIPES, MICHAEL
3965 HALL ROAD
BIG PINE KEY, FL 33043 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: MICHAEL SIPES

07/13/2003

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T, D () Change (X) Addition
Name: SIPES, JOANN
Address: 3965 HALL ROAD
City-St-Zip: BIG PINE KEY, FL 33043 US

Title: P, D () Change (X) Addition
Name: SIPES, MICHAEL
Address: 3965 HALL ROAD
City-St-Zip: BIG PINE KEY, FL 33043 US

Title: V, D () Change (X) Addition
Name: BOWE, ROBERT
Address: 139 LE GRAND LANE
City-St-Zip: CUDJOE KEY, FL 33042 US

Title: S, D () Change (X) Addition
Name: AHLWEDE, TONY
Address: 1200-A GILMORE DR.
City-St-Zip: KEY WEST, FL 33040 US

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: MICHAEL SIPES

P, D

07/13/2003

Electronic Signature of Signing Officer or Director

Date