2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009015

Name:

Address:

City-St-Zip:

SANDS, TYSON

1627 LARGO ST

KEY WEST, FL 33040

I----- KEVAMEOT DAINTDALL LEAG

FILED Jan 08, 2004 Secretary of State

Entity Name: KEY WEST PAINTBALL LEAGUE, INC. **Current Principal Place of Business: New Principal Place of Business:** 315 AVENUE A KEY WEST, FL 33040 **Current Mailing Address: New Mailing Address:** 315 AVENUE A KEY WEST, FL 33040 FEI Number: 02-0709296 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DAVILA, GREGORY D ESQ. 2405 FLAGLER AVE KEY WEST, FL 33040 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition PEREZ, EDWARD Name: Name: Address: 315 AVENUE A Address: City-St-Zip: KEY WEST, FL 33040 City-St-Zip: Title: () Delete Title: () Change () Addition PEREZ, EDWARD JR Name: Name: Address: 315 AVENUE A Address: City-St-Zip: KEY WEST, FL 33040 City-St-Zip: Title: () Delete Title: () Change () Addition SANDS, MICHAEL Name: Name: 1627 LARGO ST Address: Address: City-St-Zip: KEY WEST, FL 33040 City-St-Zip: Title: () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: EDWARD M PEREZ D 01/08/2004