

**2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Apr 23, 2007**  
**Secretary of State**

DOCUMENT# N05000012817

**Entity Name:** KEY WEST AND LOWER KEYS WORKFORCE HOUSING ALLIANCE, INC**Current Principal Place of Business:**201 FRONT ST., STE. 224  
KEY WEST, FL 33040**New Principal Place of Business:****Current Mailing Address:**201 FRONT ST., STE. 224  
KEY WEST, FL 33040**New Mailing Address:****FEI Number:** 20-3985103**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS RD., STE. 221E  
PALM BEACH GARDENS, FL 33410 US**Name and Address of New Registered Agent:**SWIFT, III, EDWIN O  
201 FRONT STREET  
SUITE 224  
KEY WEST, FL 33410 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: EDWIN O. SWIFT, III

04/23/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:****Title:** D ( ) Delete  
**Name:** SWIFT, EDWIN O. III  
**Address:** 201 FRONT ST., STE. 224  
**City-St-Zip:** KEY WEST, FL 33040**Title:** D ( ) Delete  
**Name:** BELLAND, CHRISTOPHER  
**Address:** 201 FRONT ST., STE. 224  
**City-St-Zip:** KEY WEST, FL 33040**Title:** D ( ) Delete  
**Name:** KOENIG, TIMOTHY  
**Address:** 201 FRONT ST., STE. 224  
**City-St-Zip:** KEY WEST, FL 33040**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:**

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDWIN O. SWIFT, III

D

04/23/2007

Electronic Signature of Signing Officer or Director

Date