2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30065

Apr 21, 2009 Secretary of State

Entity Name: KEY LIGHT HOMES, INC.

Current Principal Place of Business:New Principal Place of Business:C/O CHESTER V. COLE1315 NORTH VANNORTWICK ROAD

1315 NORTH VANNORTWICK ROAD LECANTO, FL 344619710 US LECANTO, FL 344619710 US

Current Mailing Address: New Mailing Address:

130 HEIGHTS AVE INVERNESS, FL 344524571 US

FEI Number: 59-2933348 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

COLE, CHESTER V. 1315 NORTH VANNORTWICK ROAD LECANTO, FL 34461 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: () Change () Addition

 Name:
 HEPFER, ROBERT B MR.
 Name:

 Address:
 5684 EAST CARLTON CT.
 Address:

 City-St-Zip:
 INVERNESS, FL 34453 US
 City-St-Zip:

 Name:
 WHITTON, JR., B. M MR.
 Name:
 DETMER, E. DAVID

 Address:
 4930 N. MAPLE TERRACE
 Address:
 485 S MAYLEN AVENUE

 City-St-Zip:
 HERNANDO, FL 344423435 US
 City-St-Zip:
 LECANTO, FL 34461 US

Title: ST () Delete Title: () Change () Addition

 Name:
 DODGE, EDWARD
 Name:

 Address:
 8581 E SWEETWATER DR
 Address:

 City-St-Zip:
 INVERNESS, FL 344507300 US
 City-St-Zip:

Name:THURMAN, KAREN MS.Name:COURTNEY, MARY GAddress:9067 SW BLUE RUN DRIVEAddress:2400 FOREST DR., UNIT 219City-St-Zip:DUNNELLON, FL 34432 USCity-St-Zip:INVERNESS, FL 34453 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: E. DAVID DETMER VP 04/21/2009