

**2008 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 14, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # N94000003686**

1. Entity Name  
**KEYS TO LIFE, INC.**



Principal Place of Business  
**4701 E. HANNA AVENUE  
TAMPA, FL 33610**

Mailing Address  
**4701 E. HANNA AVENUE  
TAMPA, FL 33610**

**DO NOT WRITE IN THIS SPACE**



04112008 No Chg-NP CR2E037 (4/06)

4. FEI Number  
**59-3259201**

Applied For  
Not Applicable

5. Certificate of Status Desired ☒

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**KENNEDY, CHARLES L REV.  
4701 E. HANNA AVENUE  
TAMPA, FL 33610**

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$81.25  
Due by May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**000000898237  
04/25/08-80080-005 70.00**

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KENNEDY, CHARLES L REV. 4701 E. HANNA AVENUE TAMPA, FL 33610
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEWIS, BENJAMIN 3804 E. CRESHAW STREET TAMPA, FL 33604
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TRAMEL, ROBERT C 3101 W. GRACE STREET TAMPA, FL 33607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KENNEDY, ERNEST 10703 ARROWHEAD LAKE COURT THONOTOSASSA, FL 33592
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/12/08**

**813-623-1181**

Daytime Phone #