


**2005 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 10, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N97000001784</b> 1. Entity Name KEY WEST KRITTER PATROL, INC.	
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Principal Place of Business 8 W CYPRESS TERR KEY WEST, FL 33040	Mailing Address 8 W CYPRESS TERR KEY WEST, FL 33040
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<b>DO NOT WRITE IN THIS SPACE</b>
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01062005 No Chg-NP CR2E037 (10/03)

4. FEI Number 65-0740639	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  GLEISNER, GERALD 8 WEST CYPRESS TERR KEY WEST, FL 33040	<b>DO NOT WRITE IN THIS SPACE</b>
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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

<b>Filing Fee is \$61.25 Due by May 1, 2005</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP CRANE, CAROLYN S 8 W CYPRESS TERR KEY WEST, FL 33040
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVST GLEISNER, GERALD 8 W CYPRESS TERR KEY WEST, FL 33040
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MACNELLY, SUSAN 1400A ALBERTA ST KEY WEST, FL 33040
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000000176330  
01/10/05-80083-025 61.25

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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:**  **GERALD G. GLEISNER** 1/4/05 305-296-4223  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Day Daytime Phone #