2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 19, 2006 8:00 am Secretary of State

DOCUMENT # N9700001784 1. Entity Name KEY WEST KRITTER PATROL, INC.						01-19-2006	_		5	
Principal Place of Business Mailing Address 8 W CYPRESS TERR 8 W CYPRESS TERR KEY WEST, EL 33040 KEY WEST, FL 33040					- 4801164 814			· ····································	KS4 DI 1881	
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2. Principal Place of Business 3. Mailing Address 66 PETRL 66 PETRL			m. /	200-0	i imalijus iku i		II III II II	Mari (1914) Bur	ILBA DA KADA	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01142006 Chg-NP CR2E037 (11/05)					
City & Stat	de .	City & State			4. FEI Number			ПАр	plied For	
Land PLACID FL.		LAKE PLACID, FL.			65-0740	639		No	Applicable	
Zip 333	Country U. 500.	Zφ 333852	Cox	U. S.A.	5. Certificate of	of Status Desired		8.75 Add ee Required		
	6. Name and Address of Current	Registered Agent		Name _	7. Name and	Address of the	Registered A	gent		
GLEISNEF	R, GERALD			GLETSNER, GERBLD						
	NPRESS TERR 7, KL 33040			Street Address (P.O. Box Number is Not Acceptable) 166 PETO-RU ROCO						
1001 1100	V. 1/4 000±0									
i				City La Ke	PLAC	10	FL	Zip Code	52	
	named entity submits this statement to	r the purpose of changing	its register	ed office or registe	ered agent, or both	, in the State of I	Florida. Iam fa	miliar with,	and accept	
ur canga	the obligations of registered agent.									
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (MOTE: Registered Agent signature required when reinstaining) DATE										
	Signature, typed or printed name of registered agent	and mae a applicable. {	NOTE: Registere	ed Agent signature requir	ed when reinstating)		DATE			
	Filling Fee is \$61.25 Due by May 1, 2006	9. Election		inancing	\$5.00 May Be Added to Fees		Make check orida Departr			
10.	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND DIR	9. Election Trust Fur RECTORS	Campaign F nd Contribut 11.	inancing lion.	\$5.00 May Be	Fle	orida Departi CERS AND DIRI	ment of St	10	
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12. I nereby 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, withyall other like empowered.

SIGNATURE: SIGNATURE STOP TYPED OR PRINTED MARKE OF SIGNATURE OR DIRECTOR CONTROL OF CON