2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006870

FILED Aug 16, 2005 Secretary of State

Entity Name: KEY WEST INDEPENDENT EDUCATION, INC.

Current Principal Place of Business: New Principal Place of Business:

720 TRUMAN AVE 2713 FLAGLER AVE KEY WEST, FL 33040 KEY WEST, FL 33040

Current Mailing Address: New Mailing Address:

21 AZALEA DRIVE 2713 FLAGLER AVE KEY WEST, FL 33040 KEY WEST, FL 33040

FEI Number: 65-0915399 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

DOLAN-HEITLINGER, JOHN
21 AZALEA DRIVE
GRATTAN, MICHAEL R
29118 IRIS DRIVE

KEY WEST, FL 33040 US BIG PINE KEY, FL 33043 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: MICHAEL R. GRATTAN 08/16/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: DOLAN-HEITLINGER, JOHN Name: GRATTAN, MICHAEL R

Name:DOLAN-HEITLINGER, JOHNName:GRATTAN, MICHAEL RAddress:21 AZALEA DRIVEAddress:29118 IRIS DRIVECity-St-Zip:KEY WEST, FL 33040City-St-Zip:BIG PINE KEY, FL 33043

Title: VPD () Delete Title: VPD (X) Change () Addition

 Name:
 DOLAN-HEITLINGER, EILEEN
 Name:
 EDEN, COLLEEN

 Address:
 21 AZALEA DRIVE
 Address:
 1015 FLEMING STREET

 City-St-Zip:
 KEY WEST, FL 33040
 City-St-Zip:
 KEY WEST, FL 33040

Title: TSD (X) Delete Title: () Change () Addition

 Name:
 EDEN, COLLEEN
 Name:

 Address:
 1015 FLEMING ST
 Address:

 City-St-Zip:
 KEY WEST, FL 33040
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MICHAEL R. GRATTAN PD 08/16/2005