

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000036315

FILED
Jan 16, 2009
Secretary of State

Entity Name: LAW OFFICES OF JOHN KEY, P.A.

Current Principal Place of Business:

417 ST. JOHNS AVE.
PALATKA, FL 32177

New Principal Place of Business:

452 OSCEOLA AVENUE
JACKSONVILLE BEACH, FL 32250

Current Mailing Address:

417 ST. JOHNS AVE.
PALATKA, FL 32177

New Mailing Address:

452 OSCEOLA AVENUE
JACKSONVILLE BEACH, FL 32250

FEI Number: 59-3706789

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEY, JOHN
417 ST. JOHNS AVE.
PALATKA, FL 32177 US

Name and Address of New Registered Agent:

KEY, JOHN
452 OSCEOLA AVENUE
JACKSONVILLE BEACH, FL 32250 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: JOHN KEY

01/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KEY, JOHN
Address: 417 ST JOHNS AVE.
City-St-Zip: PALATKA, FL 32177

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KEY, JOHN
Address: 452 OSCEOLA AVENUE
City-St-Zip: JACKSONVILLE BEACH, FL 32250

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

SIGNATURE: JOHN KEY

P

01/16/2009

Electronic Signature of Signing Officer or Director

Date