


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 22, 2005 08:00 AM
Secretary of State

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| DOCUMENT # P01000075974 |  |
| 1. Entity Name KEYS PUBLISHING CO., INC. | |

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| Principal Place of Business 9072 MISTY CREEK DR SARASOTA, FL 34241 | Mailing Address 9072 MISTY CREEK DR SARASOTA, FL 34241 |
|--|--|

DO NOT WRITE IN THIS SPACE



08182005 No Chg-P CR2E034 (10/03)

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|---|--------------------------------|
| 4. FEI Number 65-1148798 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

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|--|---------------------------------------|
| 6. Name and Address of Current Registered Agent WALSH, TIMOTHY 9072 MISTY CREEK DR SARASOTA, FL 34241 | DO NOT WRITE IN THIS SPACE |
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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.

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| SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> | DATE _____ |
|--|------------|

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| FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. |
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| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P WALSH, TIM 9072 MISTY CREEK DR SARASOTA, FL 34241 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S WALSH, SARAH 9072 MISTY CREEK DR SARASOTA, FL 34241 |
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08/22/05-00004-015 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 607, 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  | 8/19/05 (941) 926-8004 |
| <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | <small>Date Daytime Phone #</small> |