## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000079397

Entity Name: KEYOLA CORPORATION

FILED Mar 30, 2005 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
380 ST. PE SAINT PAI	ETER ST. UL, MN 55102					
Current Mailing Address:			New Maili	New Mailing Address:		
380 ST. PE SAINT PAI	ETER ST. UL, MN 55102					
FEI Number:	: 59-3697101	FEI Number Applied For()	FEI Number Not Appl	icable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and	Address of	New Registered Agent:	
1200 S. PII	RATION SYST NE ISLAND RE ION, FL 33324	D.				
	named entity se of Florida.	submits this statement for the p	purpose of changing i	ts registered	office or registered agent, or both	
SIGNATUR	RE:					
	Electron	ic Signature of Registered Ag	ent		Date	
Election Car	mpaign Financing	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	PD () COUGLAIN, JA' 380 ST PETER SAINT PAUL, M	ST.	Title: Name: Address: City-St-Zip:	,	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VD () BARBIERI, ROB 380 ST PETER SAINT PAUL, M	ST.	Title: Name: Address: City-St-Zip:	VD BARBIERI, R 380 ST PETE SAINT PAUL,	ER ST.	
Title: Name: Address: City-St-Zip:	SD () MCPHEETERS 380 ST PETER SAINT PAUL, M	ST.	Title: Name: Address: City-St-Zip:		( ) Change() Addition	
Title: Name: Address: City-St-Zip:	D () BOISVERT, ANI 1617 LIATRIS L RALEIGH, NC	N.	Title: Name: Address: City-St-Zip:	T FARLEY, TIM 380 ST PETE ST PAUL, MN	R ST	

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

SIGNATURE: TIMOTHY FARLEY T 03/30/2005