

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000087236

FILED
Apr 09, 2009
Secretary of State

Entity Name: ARTISTIC DESIGNS OF THE KEYS, INC.

Current Principal Place of Business:

82661 OVERSEAS HIGHWAY
ISLAMORADA, FL 33036

New Principal Place of Business:

161 CASA CT
UNIT B
TAVERNIER, FL 33070

Current Mailing Address:

82661 OVERSEAS HIGHWAY
ISLAMORADA, FL 33036

New Mailing Address:

161 CASA CT
UNIT B
TAVERNIER, FL 33070

FEI Number: 14-1844942

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LERCH, DAROLD
82661 OVERSEAS HIGHWAY
ISLAMORADA, FL 33036 US

Name and Address of New Registered Agent:

SCATURRO, WAYNE
161 CASA CT
UNIT B
TAVERNIER, FL 330370 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: WAYNE SCATURRO

04/09/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DAROLD, LERCH
Address: 82661 OVERSEAS HIGHWAY
City-St-Zip: ISLAMORADA, FL 33036

Title: VP () Delete
Name: SCATURRO, WAYNE
Address: 161 B CASA COURT
City-St-Zip: TAVERNIER, FL 33070

Title: S () Delete
Name: LAPOINT, MARC
Address: 123 PALERMO
City-St-Zip: ISLAMORADA, FL 33037

Title: T (X) Delete
Name: LERCH, STEFANIE A
Address: 82661 OVERSEAS HWY
City-St-Zip: ISLAMORADA, FL 33036

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SCATURRO, WAYNE
Address: 161B CASA CT
City-St-Zip: TAVERNIER, FL 33070

Title: VP (X) Change () Addition
Name: LERCH, DAROLD L
Address: 88005 OVERSEAS HWY
City-St-Zip: ISLAMORADA, FL 33036

Title: S/T (X) Change () Addition
Name: LERCH, STEFANIE
Address: 88005 OVERSEAS HWY
City-St-Zip: ISLAMORADA, FL 33036

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DAROLD LERCH

VP

04/09/2009

Electronic Signature of Signing Officer or Director

Date