

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 04, 2003 8:00 am**  
**Secretary of State**

0136088 AT

**DOCUMENT # P02000107206**

**1. Entity Name**  
**KEY PROPERTIES & INVESTMENTS INCORPORATED**



08-04-2003 90143 011 \*\*\*150.00

**Principal Place of Business**  
**1001 LAKE DEESON POINT**  
**LAKELAND FL 33805**  
**US**

**Mailing Address**  
**1001 LAKE DEESON POINT**  
**LAKELAND FL 33805**  
**US**



**2. Principal Place of Business**

**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

**4. FEI Number**

**82 0567319**

Applied For

Not Applicable

**5. Certificate of Status Desired**

☐

**\$8.75 Additional  
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

**6. Name and Address of Current Registered Agent**

**CORPORATION SERVICE COMPANY**  
**1201 HAYS STREET**  
**TALLAHASSEE FL 32301**

**7. Name and Address of New Registered Agent**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

**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.**

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00**

**After September 10, 2003 Fee will be \$750.00**

**Make Check Payable to Florida Department of State**

**9. Election Campaign Financing**  
Trust Fund Contribution.

☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

**TITLE** **P.D** ☐ Delete  
**NAME** **MCKINNEY, KIM**  
**STREET ADDRESS** **1001 LAKE DEESON POINT**  
**CITY-ST-ZIP** **LAKELAND FL 33805**

**TITLE** **S.T** ☐ Delete  
**NAME** **VICTORIA, MARY**  
**STREET ADDRESS** **1001 LAKE DEESON POINT**  
**CITY-ST-ZIP** **LAKELAND FL 33805**

**TITLE** **D** ☐ Delete  
**NAME** **VICTORIA, MARY**  
**STREET ADDRESS** **1001 LAKE DEESON POINT**  
**CITY-ST-ZIP** **LAKELAND FL 33805**

**TITLE** **VP** ☐ Delete  
**NAME** **MCKINNEY, JEREMY**  
**STREET ADDRESS** **1001 LAKE DEESON POINT**  
**CITY-ST-ZIP** **LAKELAND FL 33805**

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

**TITLE** ☐ Change ☐ Addition  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ Change ☐ Addition  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ Change ☐ Addition  
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**TITLE** ☐ Change ☐ Addition  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**12. I hereby certify that the information supplied with this filing does not qualify 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 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:** *[Signature]* **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**8/1/03**

CR2E034 (4/03)

Attachment  
10110689  

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P02000107206

Hello

My name is Kim Mckinney I started My business in October of 2002.

I did not receive my UBR in time for the May deadline.

I will file online in the future so this situation that I am in now will not be,

Thank you for your time  
Kim Mckinney

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