2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000083418

FILED Apr 27, 2007 08:00 All Secretary of State

1. Entity Name KEY OPTIO	C, INC.			
Principal Place of 1202 S BROAD B		Mailing Address 1202 S BROAD ST B		
BROOKSVILLE,	FL 34601	BROOKSVILLE, FL 34601		
			•	. 1 12 14 15 15 15 15 15 15 15
DO NOT WRITE IN THIS SPACE				04112007 No Chg-P CR2E034 (11/05)
DO NOT WRITE IN 1715 SPA			CE	4. FEI Number Applied For 41-2104394 Not Applied
				5. Certificate of Status Desired \$8.75 Additional Fee Required
	6. Name and Address of Current Re	gistered Agent		
KEY, TERRY A 1200 S. BROAD STREET BROOKSVILLE, FL 34601				DO NOT WRITE IN THIS SPACE
the obligation	amed entity submits this statement for the sol registered agent.	,	ered office or regist	stered agent, or both, in the State of Florida. I am familiar with, and acc
SIGNATURE	mature, typed or printed name of registered agent and	irle if applicable,	red Agent signature requi	ared when reinstating) DATE
FILE After May	NOW!!! FEE IS \$150.00 1, 2007 Fee will be \$550.00	9. Election Campaign Fina Trust Fund Contribution		55.00 May Be dded to Fees
10.	OFFICERS AND DI	RECTORS		
STREET ADDRESS 4) EY, TERRY A 352 DUVAL STREET PRING HILL, FL 34606			
TITLE			-[

DO NOT WRITE IN THIS SPACE

U00000740198 05/14/07-80057-016 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

property of design

21 E 1041 144 5 1 15 14

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

- TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

JOHN AND TERRY A. KEY SUNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

4-24-01

352-796-0340