

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000113831

FILED
Apr 27, 2004
Secretary of State

Entity Name: KEY LAND MANAGEMENT, CORP.

Current Principal Place of Business:

11704 FOREST MERE DRIVE
BONITA SPRINGS, FL 34135

New Principal Place of Business:

Current Mailing Address:

11704 FOREST MERE DRIVE
BONITA SPRINGS, FL 34135

New Mailing Address:

FEI Number: 56-2404527 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARREN, THOMAS
11704 FOREST MERE DRIVE
BONITA SPRINGS, FL 34135 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FARREN, THOMAS
Address: 11704 FOREST MERE DRIVE
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VP () Delete
Name: MACKEY, GERALD
Address: 403 WILLARD AVE
City-St-Zip: LEHIGH ACRES, FL 33936

Title: VP () Delete
Name: VONPLINSKY, MICHAEL
Address: 100 OXFORD DRIVE, #514
City-St-Zip: MONROEVILLE, PA 15146

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: THOMAS FARREN

P

04/27/2004

Electronic Signature of Signing Officer or Director

Date