

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000145860

Entity Name: KEYS TO PARADISE, INC.

FILED  
Jul 10, 2004  
Secretary of State

## Current Principal Place of Business:

1800 ATLANTIC BLVD., A-312  
KEY WEST, FL 33040

## New Principal Place of Business:

1800 ATLANTIC BLVD.  
A-312  
KEY WEST, FL 33040

## Current Mailing Address:

1800 ATLANTIC BLVD., A-312  
KEY WEST, FL 33040

## New Mailing Address:

1800 ATLANTIC BLVD.  
A-312  
KEY WEST, FL 33040

FEI Number: 74-3110960

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MAY, PHILLIS A  
1800 ATLANTIC BLVD., A-312  
KEY WEST, FL 33040 US

## Name and Address of New Registered Agent:

MAY, PHYLLIS A  
1800 ATLANTIC BLVD.  
A-312  
KEY WEST, FL 33040 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: PHYLLIS MAY

07/10/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MAY, PHYLLIS A  
Address: 1800 ATLANTIC BLVD. A-312  
City-St-Zip: KEY WEST, FL 33040

Title: D ( ) Delete  
Name: MAY, LIANE C  
Address: 3314 NORTHSIDE DR.  
City-St-Zip: KEY WEST, FL 33040

Title: D (X) Delete  
Name: SULLIVAN, HAZEL  
Address: 18300 E. WARREN  
City-St-Zip: DETROIT, MI 48234

## 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: PHYLLIS MAY

PRES

07/10/2004

Electronic Signature of Signing Officer or Director

Date