

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000123970

FILED
Apr 05, 2005
Secretary of State

Entity Name: FLORIDA KEYS VISITOR CENTER, INC.

Current Principal Place of Business:

24 KEY HAVEN RD.
KEY WEST, FL 33040

New Principal Place of Business:

106240 OVERSEAS HWY.
KEY LARGO, FL 33037

Current Mailing Address:

24 KEY HAVEN RD.
KEY WEST, FL 33040

New Mailing Address:

FEI Number: 34-2015687

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPARENBERG, AARON
24 KEY HAVEN RD.
KEY WEST, FL 33040 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: HOLT, KEITH
Address: 176 SOANISH MAIN DR.
City-St-Zip: CUDJOE KEY, FL 33042

Title: V () Delete
Name: SPARENBERG, CHARLENE
Address: 24 KEY HAVEN RD.
City-St-Zip: KEY WEST, FL 33040

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HOLT, KEITH
Address: 176 SPANISH MAIN DR.
City-St-Zip: CUDJOE KEY, FL 33042

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: CHARLENE SPARENBERG

V

04/05/2005

Electronic Signature of Signing Officer or Director

Date