

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000166749

Entity Name: KEY FUMIGATION, INC.

**FILED**  
**Apr 17, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1885 N LIME AV  
SARASOTA, FL 34234

**New Principal Place of Business:**

**Current Mailing Address:**

1885 N LIME AV  
SARASOTA, FL 34234

**New Mailing Address:**

FEI Number: 20-2089389

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TK REGISTERED AGENT, INC.  
101 E. KENNEDY BOULEVARD  
SUITE 2700  
TAMPA, FL 33602 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: WARREN, ERIK D  
Address: 3136 WOOD ST  
City-St-Zip: SARASOTA, FL 34237

Title: D  
Name: HASKELL, BRADFORD D  
Address: 4912 NEW PROVIDENCE AV  
City-St-Zip: TAMPA, FL 33629

I hereby 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 all other like empowered.

SIGNATURE: BRADFORD HASKELL

D

04/17/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date