

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000010061

FILED  
Apr 22, 2006  
Secretary of State

Entity Name: GALLERY KEY WEST, INC.

## Current Principal Place of Business:

824 DUVAL ST  
KEY WEST, FL 33046

## New Principal Place of Business:

824 DUVAL ST  
KEY WEST, FL 33040 US

## Current Mailing Address:

824 DUVAL ST  
KEY WEST, FL 33046

## New Mailing Address:

824 DUVAL ST  
KEY WEST, FL 33040 US

FEI Number: 20-2317936

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SMITH, EDGAR W  
824 DUVAL ST  
KEY WEST, FL 33046 US

## Name and Address of New Registered Agent:

HOBBS, PAM  
824 DUVAL ST  
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: PAM HOBBS

04/22/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SMITH, EDGAR W  
Address: 824 DUVAL ST  
City-St-Zip: KEY WEST, FL 33046

Title: D ( ) Delete  
Name: FISCHER, LYNN  
Address: 824 DUVAL ST  
City-St-Zip: KEY WEST, FL 33046

Title: D ( ) Delete  
Name: WILSON, JESSICA J  
Address: 824 DUVAL ST  
City-St-Zip: KEY WEST, FL 33046

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: HOBBS, PAM  
Address: 824 DUVAL ST  
City-St-Zip: KEY WEST, FL 33040

Title: D (X) Change ( ) Addition  
Name: KUKODA, JAMES L  
Address: 824 DUVAL ST  
City-St-Zip: KEY WEST, FL 33040

Title: D (X) Change ( ) Addition  
Name: CALLEJA, ELIZABETH  
Address: 824 DUVAL ST  
City-St-Zip: KEY WEST, FL 33040

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: JAMES KUKODA

D

04/22/2006

Electronic Signature of Signing Officer or Director

Date