

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 09, 2006 8:00 am**  
**Secretary of State**

05-09-2006 90089 037 \*\*\*150.00

DOCUMENT # P05000046130

1. Entity Name

THERESE KEYS, INC.



Principal Place of Business

18 SLUMBER PATH  
PALM COAST FL 32164

Mailing Address

18 SLUMBER PATH  
PALM COAST FL 32164

2. Principal Place of Business

1105 S. US Hwy 1  
Suite 105

3. Mailing Address

1105 S. US Hwy 1  
Suite 105

City & State

Bunnell, FL

City & State

Bunnell, FL

Zip

32110

Country

USA

Zip

32110

Country

USA

4. FEI Number

20-2560386

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

KEYS, THERESE A  
18 SLUMBER PATH  
PALM COAST FL 32164

7. Name and Address of New Registered Agent

Name

Keys, Therese A

Street Address (P.O. Box Number is Not Acceptable)

1105 S. US Hwy 1 Suite 105

City

Bunnell

FL

Zip Code

32110

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2006 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete  
NAME KEYS, THERESE A  
STREET ADDRESS 18 SLUMBER PATH  
CITY-ST-ZIP PALM COAST FL 32164

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME ~~Therese A~~  
STREET ADDRESS 11 Bunnell  
CITY-ST-ZIP Palm Coast, 32164

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Therese Keys, President 986-437-7000

Date 5-25-06 Daytime Phone #