

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000067193

Entity Name: FLORIDA KEY HOLDERS, INC.

FILED
Mar 18, 2009
Secretary of State

Current Principal Place of Business:

7315 WINDSOR STREET
HUDSON, FL 34667

New Principal Place of Business:

4610 LAKE IN THE WOODS DRIVE
SPRING HILL, FL 34607

Current Mailing Address:

7315 WINDSOR STREET
HUDSON, FL 34667

New Mailing Address:

4610 LAKE IN THE WOODS DRIVE
SPRING HILL, FL 34607

FEI Number: 26-2984022

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARNES, CHERYL C
7315 WINDSOR STREET
HUDSON, FL 34667 US

Name and Address of New Registered Agent:

BARNES, CHERYL C
4610 LAKE IN THE WOODS DRIVE
SPRING HILL, FL 34607 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: CHERYL C. BARNES

03/18/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BARNES, ROBERT T
Address: 7315 WINDSOR STREET
City-St-Zip: HUDSON, FL 34667

Title: CS () Delete
Name: BARNES, CHERYL C
Address: 7315 WINDSOR STREET
City-St-Zip: HUDSON, FL 34667

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BARNES, ROBERT T
Address: 4610 LAKE IN THE WOODS DRIVE
City-St-Zip: SPRING HILL, FL 34607

Title: CS (X) Change () Addition
Name: BARNES, CHERYL C
Address: 4610 LAKE IN THE WOODS DRIVE
City-St-Zip: SPRING HILL, FL 34607V

I hereby certify that the information supplied with this filing does not qualify 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: CHERYL C. BARNES

CS

03/18/2009

Electronic Signature of Signing Officer or Director

Date