## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P10000062203

Entity Name: KEY WEST CASINO ONE, INC.

FILED Mar 14, 2011 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

2435 MONTPELIER ROAD 24430 SANDHILL BLVD PUNTA GORDA, FL 33983

**UNIT 304** 

PUNTA GORDA, FL 33983

**Current Mailing Address: New Mailing Address:** 

2435 MONTPELIER ROAD 24430 SANDHILL BLVD PUNTA GORDA, FL 33983 **UNIT 304** 

PUNTA GORDA, FL 33983

FEI Number: 27-3175432 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

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:

STOKEN, RAYMOND G Name: 450 ADELE DRIVE Address: City-St-Zip: IRWIN, PA 15642

Title:

Name: MOLINARI, JOHN R 230 RUSTIC DRIVE Address:

NORTH HUNTINGDON, PA 15642 City-St-Zip:

Title: CEOP

STOKEN, GARY J Name: 2435 MONTPELIER ROAD Address: City-St-Zip: PUNTA GORDA, FL 33983

Title: ST

STOKEN, MELANIE G Name: Address: 2435 MONTPELIER ROAD City-St-Zip: PUNTA GORDA, FL 33983

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: MELANIE G. STOKEN ST 03/14/2011