

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000069867

FILED
Apr 23, 2012
Secretary of State

Entity Name: FLORIDA KEYS BUSINESS EXCHANGE & COOPERATIVE, INC.

Current Principal Place of Business:

270 AVE F
KEY WEST, FL 33040 US

New Principal Place of Business:

6440 SECOND STREET
UNIT 9
KEY WEST, FL 33040 US

Current Mailing Address:

PO BOX 2376
KEY WEST, FL 33045

New Mailing Address:

FEI Number: 45-2906077

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

THOR, CINDY L MS.
270 AVE F
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

THOR, CINDY L MS.
6440 SECOND STREET
UNIT 9
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: CINDY LOU THOR

04/23/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: THOR, CINDY L
Address: 6440 SECOND STREET, UNIT 9
City-St-Zip: KEY WEST, FL 33040

Title: VP
Name: THOR, CINDY L
Address: 6440 SECOND STREET, UNIT 9
City-St-Zip: KEY WEST, FL 33040

Title: SEC
Name: THOR, CINDY L
Address: 6440 SECOND STREET, UNIT 9
City-St-Zip: KEY WEST, FL 33040

Title: TREA
Name: 1ST RESPONSE ADJUSTERS, P.A.
Address: PO BOX 2376
City-St-Zip: KEY WEST, FL 33045

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: CINDY LOU THOR

PRES

04/23/2012

Electronic Signature of Signing Officer or Director

Date