

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000034271

FILED  
Apr 26, 2004  
Secretary of State

Entity Name: KEY LARGO HEALTH CENTER, INC.

## Current Principal Place of Business:

102900 OVERSEAS HIGHWAY  
KEY LARGO, FL 33037

## New Principal Place of Business:

## Current Mailing Address:

102900 OVERSEAS HIGHWAY  
KEY LARGO, FL 33037

## New Mailing Address:

FEI Number: 65-0756727

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SANTAYANA, GEORGE G  
102900 OVERSEAS HIGHWAY  
KEY LARGO, FL 33037 US

## Name and Address of New Registered Agent:

SANTAYANA, GEORGE  
102900 OVERSEAS HWY.  
#8  
KEY LARGO, FL 33037 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: GEORGE SANTAYANA

04/26/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: V ( ) Delete  
Name: SANTAYANA, GEORGE G  
Address: 102900 OVERSEAS HWY STE.,#8  
City-St-Zip: KEY LARGO, FL 33037

Title: PD ( ) Delete  
Name: SANTAYANA, GEORGE  
Address: 239 BEACH AVE  
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: STD ( ) Delete  
Name: SANTAYANA, ANN T  
Address: 239 BEACH AVE  
City-St-Zip: ATLANTIC BEACH, FL 32233

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GEORGE SANTAYANA

PD

04/26/2004

Electronic Signature of Signing Officer or Director

Date