2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000087047

Entity Name: KEY WEST BANCGROUP, INC.

FILED Feb 04, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 701 WHITEHEAD STREET KEY WEST, FL 33040 **Current Mailing Address: New Mailing Address:** 701 WHITEHEAD STREET KEY WEST, FL 33040 FEI Number: 65-0807107 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: KEY WEST BANK 701 WHITEHEAD ST 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition HOGUE, PHILIP D Name: Name: 1248 OCEAN DR. Address: Address: City-St-Zip: SUMMERLAND KEY, FL 33042 City-St-Zip: Title: Title: () Delete () Change () Addition BROWNING, MICHAEL L Name: Name: 402 APPELROUTH LANE Address: Address: City-St-Zip: KEY WEST, FL 33040 City-St-Zip: Title: Title: () Delete () Change () Addition FINIGAN, MARK Name: Name: 112 WHITNEY COURT Address: Address: City-St-Zip: WARNER ROBINS, GA 31088 City-St-Zip: Title: () Delete Title: () Change () Addition GREEN, MARVA E Name: Name: Address: 1604 BAHAMA DRIVE Address: City-St-Zip: KEY WEST, FL 33040 City-St-Zip: Title: Title: () Delete () Change () Addition KLITENICK, RICHARD Name: Name: 624 WHITEHEAD ST. Address: Address: City-St-Zip: KEY WEST, FL 33040 City-St-Zip: Title: () Delete Title: (X) Change () Addition BOTWAY, CLIFFORD A BOTWAY, CLIFFORD A Name: Name: 460 BEECHMONT DRIVE Address: 1114 AVENUE OF THE AMERICAS Address: City-St-Zip: NEW YORK, NY 10036 City-St-Zip: NEW YORK, NY 10804

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: PHILIP B HOGUE PD 02/04/2004