

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000093854

FILED
Jan 20, 2004
Secretary of State

Entity Name: THE KEY SOURCE, INC.

Current Principal Place of Business:

491 NO STATE RD 434
#123
ALTAMONTE SPRINGS, FL 32714 US

New Principal Place of Business:

496 ESTHER LANE
ALTAMONTE SPRINGS, FL 32714 US

Current Mailing Address:

491 SR 434 NORTH
STE 111
ALTAMONTE SPRINGS, FL 32714 US

New Mailing Address:

496 ESTHER LANE
ALTAMONTE SPRINGS, FL 32714 US

FEI Number: 59-3476396

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHATTUCK, DORIS
308 LONESOME PINE DR
LONGWOOD, FL 32779

Name and Address of New Registered Agent:

SHATTUCK, DORIS
2325 SWEETWATER COUNTRY CLUB PL DR
APOPKA, FL 32712

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: DORIS SHATTUCK

01/20/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SHATTUCK, DORIS
Address: 2325 SWEET WITTER CO CLUB PL
City-St-Zip: APOPKA, FL 32712

Title: S () Delete
Name: WRIGHT, STEVEN
Address: 4149 LAUGHLIN ROAD
City-St-Zip: ZELLWOOD, FL 327980134

Title: T () Delete
Name: REID, ROBT
Address: 7602 SW 50TH ROAD
City-St-Zip: GAINESVILLE, FL 32608

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: DORIS SHATTUCK

D

01/20/2004

Electronic Signature of Signing Officer or Director

Date