

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 08, 2006 8:00 am
Secretary of State

08-08-2006 90003 015 ***150.00

DOCUMENT # P97000093854



1. Entity Name

THE KEY SOURCE, INC.

Principal Place of Business

496 ESTHER LANE
ALTAMONTE SPRINGS FL 32714
US

Mailing Address

496 ESTHER LANE
ALTAMONTE SPRINGS FL 32714
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

2nd MOORE

CR2E034 (4/06)

City & State

City & State

4. FEI Number **59-3476396**

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

DUE BY September 6, 2006

Make Check Payable to Florida Department of State

S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. ☒

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
SHATTUCK, DORIS
2325 SWEET WITTER CO CLUB PL
APOPKA FL 32712 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
S
WRIGHT, STEVEN
4149 LAUGHLIN ROAD
ZELLWOOD FL 32798-0134 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
T
REID, ROB T
7602 SW 50TH ROAD
GAINESVILLE FL 32608 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

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NAME
STREET ADDRESS
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Doris Shattuck

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-3-06

Date

407-464-1037

Daytime Phone #

8-3-06

ATTACHMENT 50024736
P970000938.54

Report was ~~never~~ received!
I've always taken care of this
report on time -

Please wait late fee -

Thanks

Doris Shattuck

The Key Source