2007 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P98000029320

1. Entity Name
KEY SEAL COATING, INC.

Principal Place of Business	Mailing Address
5437 16TH ST. EAST BRADENTON, FL 34203	P.O. BOX 639 ONECO, FL 34264

DO NOT WRITE IN THIS SPACE

01072007   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
65-0816408	Not Applicable

5. Certificate of Status Desired   ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MCDOWELL, RUSSELL P
4537 19TH ST., CIR. WEST
BRADENTON, FL 34207

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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 $150.00 **After May 1, 2007 Fee will be $550.00**	**9.** Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD	
NAME	MCDOWELL, RUSSELL P	
STREET ADDRESS	4537 19TH STREET CIRCLE W	
CITY-ST-ZIP	BRADENTON, FL 34207	
TITLE	DVST	
NAME	MCDOWELL, KAY EDWARD	
STREET ADDRESS	8644 54TH AVE. WEST	
CITY-ST-ZIP	BRADENTON, FL 34210	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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CITY-ST-ZIP		

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01/10/07-80061-025 150.00

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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: _____   1/8/07   941-758-1517

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #

KAY EDWARD McDOWELL