

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2008 08:00 AM
Secretary of State

DOCUMENT # P98000065451

1. Entity Name
LONG KEY PROPERTIES, INC.



Principal Place of Business
**255 COREY AVENUE
ST. PETERSBURG BEACH, FL 33706**

Mailing Address
**255 COREY AVENUE
ST. PETERSBURG BEACH, FL 33706**



01252008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3538345	Applied For <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	Not Applicable <input type="checkbox"/>

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**ST. CLAIR, JOYCE
255 COREY AVENUE
ST. PETERSBURG BEACH, FL 33706**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	SKIPPER, PAUL J
STREET ADDRESS	255 COREY AVENUE
CITY-ST-ZIP	ST. PETERSBURG BEACH, FL 33706

TITLE	DV
NAME	ST. CLAIR, JOYCE
STREET ADDRESS	255 COREY AVENUE
CITY-ST-ZIP	ST. PETERSBURG BEACH, FL 33706

TITLE	DTS
NAME	KLINGEL, JOSEPH W
STREET ADDRESS	255 COREY AVENUE
CITY-ST-ZIP	ST. PETERSBURG BEACH, FL 33706

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 officers and directors empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/16/08