

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000052833

FILED
Apr 29, 2004
Secretary of State

Entity Name: KEY WEST ECOSCAPES, INC.

Current Principal Place of Business:

1712 LAIRD STREET
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

PO BOX 4591
KEY WEST, FL 33040

New Mailing Address:

FEI Number: 65-0925598

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COWEN, CHRISTOPHER G
1100 MARGARET ST #1
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: COWEN, CHRISTOPHER G
Address: PO BOX 4591
City-St-Zip: KEY WEST, FL 330414591

Title: VP () Delete
Name: BEGMA, MARY
Address: 628 MICKENS LN.
City-St-Zip: KEY WEST, FL 33040

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: CHRISTOPHER COWEN

P

04/29/2004

Electronic Signature of Signing Officer or Director

Date