

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000083682

Entity Name: CAPPY'S KEYS, INC.

FILED  
Jan 11, 2009  
Secretary of State

## Current Principal Place of Business:

P.O. BOX 150425  
ALTAMONTE SPRINGS, FL 327150425

## New Principal Place of Business:

748 FLORIDA BLVE  
ALTAMONTE SPRINGS, FL 32701

## Current Mailing Address:

P.O. BOX 150425  
ALTAMONTE SPRINGS, FL 327150425

## New Mailing Address:

FEI Number: 59-3601930      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PALMER, AMY  
748 FL BLVD  
ALTAMONTE SPRINGS, FL 32701      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: PSTD      ( ) Delete  
Name: PALMER, CATHERINE A  
Address: P.O. BOX 150425  
City-St-Zip: ALTAMONTE SPRINGS, FL 327150425

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:      ( ) Change      ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: C. AMY PALMER

CEO

01/11/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date