2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008
Secretary of State

DOCUMENT# P99000090968

Entity Name: KEY RESOURCE, INC.

Current Principal Place of Business:

257 RENDEZVOUS LN
PONTE VEDRA, FL 32082

New Principal Place of Business:

Current Mailing Address:

PMB 331 445 STATE RD 12N #26
JACKSONVILLE, FL 322593838

New Mailing Address:

257 RENDEZVOUS LN
PONTE VEDRA, FL 32082

FEI Number: 36-4324366 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LINGONBLAD, ULF
PMB 331 445 STATE RD 12N #26
JACKSONVILLE, FL 322593838 US

Name and Address of New Registered Agent:

LINGONBLAD, ULF
257 RENDEZVOUS LN
PONTE VEDRA, FL 32082 US

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: _____ 04/29/2008
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: LINGONBLAD, ULF
Address: PMB 331 445 STATE RD 13N #26
City-St-Zip: JACKSONVILLE, FL 322593838

Title: D ( ) Delete
Name: GOEBERTUS, CORNELIUS H
Address: 3843 COOPERS LAKE ROAD
City-St-Zip: JACKSONVILLE, FL 32224

Title: D ( ) Delete
Name: ROBINSON, WILLIAM A
Address: 7006 GAINES COURT
City-St-Zip: JACKSONVILLE, FL 32224

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: LINGONBLAD, ULF
Address: 257 RENDEZVOUS LN
City-St-Zip: PONTE VEDRA, FL 32082

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 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: ULF S. LINGONBLAD D 04/29/2008
Electronic Signature of Signing Officer or Director — Date