

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S83017

FILED  
Apr 27, 2005  
Secretary of State

Entity Name: KEY GALLEON PROPERTIES, INC.

## Current Principal Place of Business:

1609 ROCKLEDGE DR  
ROCKLEDGE, FL 32955 US

## New Principal Place of Business:

## Current Mailing Address:

1609 ROCKLEDGE DR  
ROCKLEDGE, FL 32955 US

## New Mailing Address:

FEI Number: 59-3087344

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GREENSPOON, GERALD  
100 WEST CYPRESS CREEK RD.  
SUITE 700  
FT LAUDERDALE, FL 33309 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: TRENARY, LARRY,  
Address: 1609 ROCKLEDGE DRIVE  
City-St-Zip: ROCKLEDGE, FL

Title: VPS ( ) Delete  
Name: ATKINSON, GEORGE WEB, STER  
Address: 8 RUE DE BADIER  
City-St-Zip: 86250 MOUGINS, FR

## 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: LARRY TRENARY

P

04/27/2005

Electronic Signature of Signing Officer or Director

Date