T04000001361

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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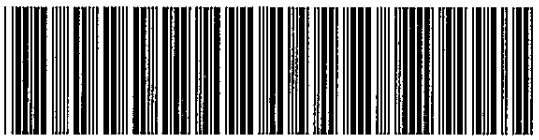

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CORPORATION SERVICE COMPANY®

ACCOUNT NO. : 072100000032

REFERENCE : 940441 4355172

AUTHORIZATION :

COST LIMIT : $ PPD

ORDER DATE : October 25, 2004

ORDER TIME : 9:56 AM

ORDER NO. : 940441-005

CUSTOMER NO: 4355172

CUSTOMER: Ms. Julia E. Todd
Morgan & Hendrick
317 Whitehead Street

Key West, FL 33040

TRADEMARK FILING

NAME: KEY WEST TOURIST DEVELOPMENT ASSOCIATION, INC.

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XX TRADEMARK

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Amanda Haddan-EXT#2955

EXAMINER'S INITIALS: _____

APPLICATION FOR THE REGISTRATION OF A TRADEMARK OR SERVICE MARK
PURSUANT TO CHAPTER 495, FLORIDA STATUTES

TO: Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

Name & address to whom acknowledgment should be sent:

HUGH J. MORGAN, ESQ.
MORGAN & HENDRICK
317 WHITEHEAD STREET
KEY WEST, FL 33040
(305) 296-5676
Daytime Telephone number

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PART I

1. (a) Applicant's name:: **KEY WEST TOURIST DEVELOPMENT ASSOCIATION, INC.**
(b) Applicant's business address:**605 UNITED STREET, STE. 1**
City/State/Zip: **KEY WEST, FLORIDA, 33040**
(c) Applicant's telephone number: **(305) 296-5596**

Individual ____ Corporation **X** Joint Venture_____ Other _____ General Partnership _____ Limited Partnership _____ Union _____.

If other than an individual,

(1) Florida registration number: **N98000002157** (2) Domicile State: **Florida**
(3) Federal Employer Identification Number: **59-2193665**

2. (a) If the mark to be registered is a service mark, the services in connection with which the mark is used: (i.e., furniture moving services, diaper services, house painting services, etc.)

_____

_____

(b) If the mark to be registered is a trademark, the goods in connection with which the mark is used:(i.e., ladies sportswear, cat food, barbecue grills, shoe laces, etc.)

CLOTHING NAMELY T-SHIRTS AND HATS

(c) The mode or manner in which the mark is used:(i.e., labels, decals, newspaper advertisements, brochures, etc.)

LABELS AND PRINTED ON SHIRTS AND HATS AND POINT OF PURCHASE DISPLAYS .

(d) The class(es) in which goods or services fall:

25

PART II

1. Date first used by the applicant, predecessor, or a related company (must include month, day and year):

(a) Date first used anywhere: **NOVEMBER 1, 2003**(b) Date first used in Florida: **NOVEMBER 1, 2003.**

PART III

1. The mark to be registered is: (If logo/design is included, please give brief written description which must be 25 words or less.)

FANTASY FEST 2004 KEY WEST, DELIRIOUS DREAMS - HILARIOUS SCREAMS.

English Translation

2. DISCLAIMER (if applicable)

NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM " 2004" AND/OR "KEY WEST." APART FROM THE MARK AS SHOWN.

I, , being sworn, depose and say that I am the owner and the applicant herein, or that I am authorized to sign on behalf of the owner and applicant herein, and no other person except a related company has the right to use such mark in Florida either in the identical form or in such near resemblance as to be likely to deceive or confuse or to be mistaken therefor. I make this affidavit and verification on my/the applicant's behalf. I further acknowledge that I have read the application and know the contents thereof and that the facts stated herein are true and correct

KEY WEST TOURIST DEVELOPMENT ASSOCIATION, INC.
Typed or printed name of applicant

By: _____
Applicant's signature or authorized person's signature

JOY SMATT, AS PRESIDENT
(List name and title)

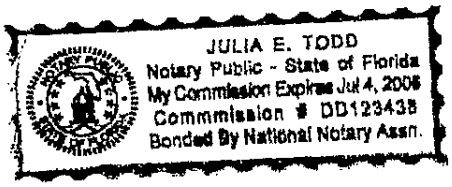
STATE OF FLORIDA

COUNTY OF MONROE

On this 22nd day of OCTOBER, 2004, JOY SMATT, personally appeared before me, _____ who is personally known to me __X__ whose identity I proved on the basis of

.

(Seal)



Julia E. Todd
Notary Public Signature

Julia E. Todd
Notary's Printed Name

July 4, 2006
My Commission Expires:

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