2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000004732

Entity Name: KEY PARTNERS, INC.

FILED Mar 14, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

15 ELLSWORTH LN 15 ELLSWORTH LANE ST LOUIS, MO 63124 ST. LOUIS, MO 63124

Current Mailing Address: New Mailing Address:

 15 ELLSWORTH LN
 15 ELLSWORTH LANE

 ST LOUIS, MO 63124
 ST. LOUIS, MO 63124

FEI Number: 43-1755222 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KARL, JAMES L II 975 N COLLIER

MARCO ISLAND, FL 33937 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCP () Delete Title: (X) Change () Addition CANEPA, CHRISTOPHER J CANEPA, CHRISTOPHER J Name: Name: 15 ELLSWORTH LN 15 ELLSWORTH LANE Address: Address: ST LOUIS, MO 63124 City-St-Zip: City-St-Zip: ST. LOUIS, MO 63124

Title: DCV () Delete Title: VD (X) Change () Addition

 Name:
 MUNSCH, ROBERT F
 Name:
 MUNSCH, ROBERT F

 Address:
 7406 BUCKINGHAM
 Address:
 7406 BUCKINGHAM

 City-St-Zip:
 ST LOUIS, MO 63105
 City-St-Zip:
 ST. LOUIS, MO 63105

Title: Title: DCPS () Delete SD (X) Change () Addition CANEPA, CHRISTOPHER J CANEPA, CHRISTOPHER J J Name: Name: 15 ELLSWORTH LANE 15 ELLSWORTH LANE Address: Address: City-St-Zip: ST LOUIS, MO 63124 City-St-Zip: ST. LOUIS, MO 63124

Title: DT () Delete Title: TD (X) Change () Addition

Name: ROSNER, JAMES C Name: ROSNER, JAMES C

Address: 45 A PROGRESS PKWY
City-St-Zip: MARYLAND HEIGHTS, MO 63043
Address: 45 A PROGRESS PARKWAY
City-St-Zip: MARYLAND HEIGHTS, MO 63043
MARYLAND HEIGHTS, MO 63043

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 J. CANEPA PD 03/14/2005