FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

111

1. Corporation Name											
CAPTAIN'S KEY PROPERTY OWNERS, INC.											
OTH TARE O INC. LITTE OFFICE HOU								1	! (Maint Carl Biald Field Andle Holes State Carl Biggs Civil Civil Giber Giber Civil		
Principal Place of Business				M	Mailing Address					i reatte imair acase inett adiil Adrit iiol Biolf Bibit Bibit Bibit dibit fill fill inett	
% 12127 CAPTAINS LANDING				12	12127 CAPTAINS LANDING				-	3. Date Incorporated or Qualified	
NORTH PALM BEACH FL 33408				N. PALM BEACH FL 33408						03/15/1978	
									-	4. FEI Number Applied For	
									1	65-0051919 Not Applicable	
2. Principal Place of Business					2a. Mailing Address					5. Certificate of Status Desired \$8.75 Additional	
21					26					Fee Required	
Suite, Apt. #, etc.					Suite, Apt. #, etc.					6. Election Campaign Financing \$5.00 May Be	
22 City & State					City & State					Trust Fund Contribution	
23					28					7. Is this nonprofit corporation a homeowners association? Yes No	
Zip		7	Country	120,	Zip	Cot	untry	,		8. This corporation owes or has paid the current year Intangible 4.	
24 25			29						Personal Property Tax due June 30. Yes No.		
	9. Name	and	Address of Curren	t Regis	stered Agent		81		1	10. Name and Address of New Registered Agent	
								Name		•	
BANISTER, JOHN								82 Street Add		(P.O. Box Number is Not Acceptable)	
12127 CAPTAINS LANDING											
N. PALM BEACH FL 33408											
								Cîty		FL 85 Zip Code	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.											
SIGNATURE											
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Age 12. OFFICERS AND DIRECTORS 13.							ent signature :	required wi	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD		OFFICERS AND	JUINE	DELETE	1.1 T	71 F			Change Addition	
NAME	BANISTI	-RI	OHN				AME				
STREET ADDRESS								ADDRESS			
CITY-ST-ZIP			FL 33408	1.4				ST-ZIP			
TITLE	SD			DELETE			2.1 TITLE			Change Addition	
NAME	GRITZ, I	MAUF	REEN		2			2.2 NAME			
STREET ADDRESS			UNS LANDING		2.3			2.3 STREET ADDRESS			
CITY-ST-ZIP	N PALM	BCF	FL					ST-ZIP			
TITLE	TD				DELETE 3.1					Change Addition	
NAME	NARCEE, JON				3.21						
STREET ADDRESS								ADDRESS			
CITY-ST-ZIP TITLE	N PALM BCH FL 33408							ST-ZIP		Change Addition	
		N 1/5	:NI		- DETEIC	4.1 TT 4. 2 N		İ		Change Maddition	
NAME HARMON, KEN STREET ADDRESS 12071 CAPTIANS LANDING								ADDOCCC			
CITY-ST-ZIP N PALM BCH FL					4.3 STREET ADDRESS			1			
TITLE	IN ACIN	UUI	16	-	DELETE	4.4 CI 5.1 Ti		1-21		Change Addition	
NAME						5.2 NA					
STREET ADDRESS								ADDRESS			
CITY-ST-ZIF							5.4 CITY-ST-ZIP				
TITLE					DELETE 6.1 TITLE					☐ Change ☐ Addition	
NAME						6.2 NA	ME				
STREET ADDRESS						6.3 \$T	REET.	ADDRESS			
CITY-ST-7IP						6401	ry - 91	T_ 719			

14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

FILED

Jan 16 1998 8:00am

Secretary of State