

**FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

**FILED**

**Jan 24 1997 8:00am  
Secretary of State**

**PROFIT CORPORATION ANNUAL REPORT 1997**



**FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS**

**DOCUMENT # L61328 (5)**

**1. Corporation Name  
BAYVIEW PROPERTIES OF THE KEYS, INC.**



**Principal Place of Business Mailing Address  
166 RUSHTON LANE TAVERNIER FL 33070 166 RUSHTON LANE TAVERNIER FL 33070-3015**

**3. Date Incorporated or Qualified 03/30/1990 3a. Date of Last Report 05/01/1996**  
**4. FEI Number 65-0250086 Applied For Not Applicable**  
**5. Certificate of Status Desired \$8.75 Additional Fee Required**  
**6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees**  
**8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No**

**2. Principal Place of Business 2a. Mailing Address**  
**21. Suite, Apt. #, etc. 26. Suite, Apt. #, etc.**  
**22. City & State 27. City & State**  
**23. Zip Country 28. Zip Country**  
**24. 25. 29. 30.**

**9. Name and Address of Current Registered Agent  
MCDERMOTT, THOMAS J.  
166 RUSHTON LANE  
TAVERNIER FL 33070**

**10. Name and Address of New Registered Agent**  
**81. Name**  
**82. Street Address (P.O. Box Number is Not Acceptable)**  
**83.**  
**84. City FL 85. Zip Code**

**11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes**

**SIGNATURE: \_\_\_\_\_ DATE \_\_\_\_\_**  
Signatures of principal officers, directors, registered agent and line if applicable (NOTE: Registered Agent signature required when reinstating)

**12. OFFICERS AND DIRECTORS**

TITLE	DPST	<input type="checkbox"/> DELETE
NAME	MCDERMOTT, THOMAS J	
STREET ADDRESS	166 RUSHTON LANE	
CITY - ST - ZIP	TAVERNIER FL 33070	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

**14. I do hereby certify that the information supplied with this filing 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.**

**SIGNATURE: \_\_\_\_\_ DATE: 1/19/97 305-852-8585**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (9/96)