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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

L69998

(7)

KEYS FURNITURE CONNECTION, INC.

FILED
May 06 1998 8:00am
Secretary of State



Principal Place	of Business	Mailing Address			4:4:: 6:5:: 4:5:: 5:5:: 6:5:: 105
WROSS D.		%ROSS D. ELWELL			
1757 OVERSEAS HIGHWAY MARATHON FL 33050		1757 OVERSEAS HIGHWAY			
		MARATHON FL 3305	0	DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified 04/30/1990	
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. #, etc.		26 Suite Ant # ote		65-0335802	Not Applicat
22 Suite, Apr. 1	π, <del>Q</del> (C.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	3	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25]	29	30	Personal Property Tax due June 30.	☐ Yes ☐ No
	9. Name and Address of Currer	nt Hegistered Agent	81 Name	10. Name and Address of New Register	ed Agent
	LWELL, ROSS D		oi Name		
	757 OVERSEAS HWY		82 Street Ac	ddress (P.O. Box Number is Not Acceptable)	
М	ARATHON FL 33050		83		
			83		
			84 City		85 Zip Code
				<u> </u>	_ , ,
11. Pursuant t	o t <b>he</b> provisions of Sections 607.050 eoistered apent, or both, in the State	02 and 607.1508, Florida <b>Sta</b> t e of Florida, Such change wa	lutes, the above-named co s authorized by the corno	orporation submits this statement for the purpositation's board of directors. I hereby accept the re-	e of changing its registered
	n familiar with, and accept the oblig	ations of Section 607.0505.	Florida Statutes.	and the second of an octors. Thereby accept the	appendition do regiono de
agent. I ar	in tall the control of the larvey				
SIGNATURE					
SIGNATURE	Signature, typed or proted name of registered ag-	ent and title if applicable (N	OTF Registered Agent signature re-		
SIGNATURE	Signature: Typed or printed name of registered age OFFICERS AN	end and title if applicable (N D.DIRECTORS	OTF: Registered Agent signature re-	quired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTORS IN 12
SIGNATURE 12.	Signature: typical or prestred name of registered ag- OFT ICERS AN	ent and title if applicable (N	OTE Registered Agent signature re  13. 1.1 TITLE		
SIGNATURE  12. TITLE NAME	Stgnature, typical or printed name of registered appoint of PTICERS AN PO ELWELL, ROSS D	end and title if applicable (N D.DIRECTORS	OTF Registored Agent signature ro  13. 1.1 TITLE 12 NAME		AND DIRECTORS IN 12
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