

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 12 PM 11:47

DOCUMENT # N06128 (5)
1. Corporation Name
KEY SQUARE ASSOCIATION, INC.

Principal Place of Business Mailing Address
1096 SUNSET STRIP 1096 SUNSET STRIP
SUNRISE FL 33313 SUNRISE FL 33313

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 3a. Date of Last Report
11/13/1984 04/27/1994

4. FEI Number Applied For
65-0027971 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**

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status **\$68.75 Supplemental Fee Not Required**

8. This corporation has liability for intangible tax under S. 189.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address

21 26

*Suite, Apt. #, etc. Suite, Apt. #, etc.

22 27

City & State City & State

23 * 28

Zip Country Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

GRIFFITH, W. R.
1096 SUNSET STRIP
SUNRISE FL 33313

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City 85 Zip Code

FL

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
W. R. Griffith 3-23-95
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	GEARY, WILLIAM W. JR.
STREET ADDRESS	1096 SUNSET STRIP
CITY - ST - ZIP	SUNRISE FL
TITLE	VO
NAME	GRIFFITH, W.R.
STREET ADDRESS	1096 SUNSET STRIP
CITY - ST - ZIP	SUNRISE FL
TITLE	STD
NAME	CHANG MARIA L.
STREET ADDRESS	2800 28TH ST STE 222
CITY - ST - ZIP	SANTA MONICA CA
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
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	SECRETARY-TREASURER & DIRLEC. <input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	GRIFFITH, W.R.
2.3 STREET ADDRESS	1096 SUNSET STRIP
2.4 CITY - ST - ZIP	SUNRISE, FL 33313
3.1 TITLE	DIRECTOR <input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	BARBARA BARCLIFT
3.3 STREET ADDRESS	1096 SUNSET STRIP
3.4 CITY - ST - ZIP	SUNRISE, FL 33313
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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 applicable) of this attachment with an address.

SIGNATURE: DATE TELEPHONE #
W. R. Griffith 3-23-95 (305) 792-5111
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Telephone #
W. R. Griffith, Secretary-Treasurer