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**May 04, 1999 8:00 am**  
**Secretary of State**

05-04-1999 90020 020 \*\*\*\*70.00

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NONPROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N46809**

1. Corporation Name  
**CLEAN FLORIDA KEYS, INC.**

Principal Place of Business 3140 NORTHSIDE DR STE. 201 KEY WEST FL 33040 US	Mailing Address P.O. BOX 1528 KEY WEST FL 33041
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2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 01/13/1992
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 65-0334997
City & State 23	City & State 28	5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>
Zip 24	Country 25	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>

9. Name and Address of Current Registered Agent

**SULLIVAN, GREGORY**  
**1136 CALLE ENSCANADA**  
**MARATHON FL 33050**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	C/D (CHAIR)
NAME	LEWIS, SALLY	1.2 NAME	SULLIVAN, GREGORY
STREET ADDRESS	401 SOUTH STREET	1.3 STREET ADDRESS	1136 CALLE ENSCANADA
CITY-ST-ZIP	KEY WEST FL 33040	1.4 CITY-ST-ZIP	MARATHON, FL 33050
TITLE	D	2.1 TITLE	VE/DVICE CHAIR
NAME	BEAVER, DENNIS	2.2 NAME	KATHY TORIBIO
STREET ADDRESS	812 DUVAL STREET	2.3 STREET ADDRESS	1014 ELGIN DRIVE
CITY-ST-ZIP	KEY WEST FL 33040	2.4 CITY-ST-ZIP	KEY WEST, FL 33040
TITLE	D	3.1 TITLE	S/D (SECRETARY)
NAME	DAVIS, MARCEY	3.2 NAME	KATHLEEN HINGLARB
STREET ADDRESS	446 CROTON	3.3 STREET ADDRESS	3920 SOUTH ROOSEVELT BLVD #43
CITY-ST-ZIP	BIG PINE KEY FL 33043	3.4 CITY-ST-ZIP	KEY WEST, FL 33040
TITLE	C/D	4.1 TITLE	D
NAME	ROSE, MARCI L	4.2 NAME	ROSE, MARCI L.
STREET ADDRESS	411 FLEMING	4.3 STREET ADDRESS	818 WHITE ST.
CITY-ST-ZIP	KEY WEST FL 33040	4.4 CITY-ST-ZIP	KEY WEST, FL 33040
TITLE	D	5.1 TITLE	D
NAME	EDWARDS, KIP	5.2 NAME	KIP EDWARDS
STREET ADDRESS	313 WILLIAM STREET	5.3 STREET ADDRESS	1075 DUVAL ST, UNIT C-21, SUITE 214
CITY-ST-ZIP	KEY WEST FL 33040	5.4 CITY-ST-ZIP	KEY WEST, FL 33040
TITLE	T/D	6.1 TITLE	T/D (TREASURER)
NAME	MURRELL, ROBERT JR.	6.2 NAME	CAROLINE ROOT
STREET ADDRESS	330 WHITEHEAD STREET	6.3 STREET ADDRESS	249 SOUTHARD ST.
CITY-ST-ZIP	KEY WEST FL 33040	6.4 CITY-ST-ZIP	KEY WEST, FL 33040

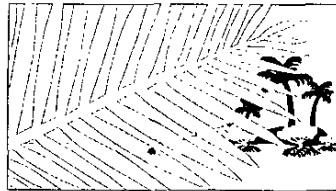
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report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

SIGNATURE: MONTY KLEIN DATE: April 13, 1999 (305-296-3791)

CR2E037 (1/198)

475757-90020-20  
N46809



**CLEAN** FLORIDA  
KEYS INC.

**Principal Place of Business:**  
3140 Northside Drive – Suite 201 – Key West, FL 33040

**Mailing Address:**  
PO Box 1528, Key West FL 33041

**Phone (305) 296-3791 \* Fax (305) 296-6132 \* Email: [KeysBeauty@aol.com](mailto:KeysBeauty@aol.com)**

**Addendum to Nonprofit Corporation Annual Report**

**Section 13. Additions/Changes to Officers and Directors**

- 11. D/ED - (Executive Director)
- 12. Marie W. Klemann
- 13. 23075 Tarpon Lane
- 14. Cudjoe Key, FL 3302

- 11. D
- 12. Brian Carman
- 13. 22 Aster Terrace
- 14. Key West, FL 33040

- 11. D
- 12. William Hawthorne, M.D.
- 13. 1400 vonPhister St.
- 14. Key West, FL 33040

- 11. D
- 12. June Helbling
- 13. 1103 Indies Drive, South
- 14. Duck Key, FL 33050

- 11. D
- 12. Gailanna Matthews
- 13. 1406 Olivia St.
- 14. Key West, FL 33040

- 11. D
- 12. Merili McCoy
- 13. 88 Hilton Haven Drive
- 14. Key West, FL 33040