

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # N95000001558 (4)

1. Corporation Name

OLD FIRE HOUSE PRESERVATION, INC.



Principal Place of Business: 100 S.E. 2ND STREET, 17TH FLOOR, MIAMI FL 33131-1101
Mailing Address: 100 S.E. 2ND STREET, 17TH FLOOR, MIAMI FL 33131-1101

3. Date Incorporated or Qualified: 04/04/1995
3a. Date of Last Report

2. Principal Place of Business: 21 1026 Grinnell St.
2a. Mailing Address: 26 P.O. Box 5563

4. FEI Number: 65-0621842
Applied For: Not Applicable

22 City & State
27 City & State

5. Certificate of Status Desired:
\$8.75 Additional Fee Required

23 Zip: 25 Country
28 Zip: 29 Country

6. Election Campaign Financing Trust Fund Contribution:
\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

SETTLES, VALERIE F
100 S.E. 2ND STREET
17TH FLOOR
MIAMI FL 33131-1101

10. Name and Address of New Registered Agent
81 Name: Diane Cowan
82 Street Address (P.O. Box Number is Not Acceptable): 605-B Simonton St.
83
84 City: Key West FL 85 Zip Code: 33040

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: *Valerie F Settles* Registered Agent DATE: 6-26-96

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
D	VEGA, ALEX 2418 FLAGLER KEY WEST FL	<input type="checkbox"/> DELETE	
D	FAHEY, TIM 2713 HARRIS KEY WEST FL	<input checked="" type="checkbox"/> DELETE	
D	CASTRO, ED 1805 BAHAMA KEY WEST FL	<input type="checkbox"/> DELETE	
D	DODEZ, LEE 901 DUVAL KEY WEST FL	<input checked="" type="checkbox"/> DELETE	
D	WROLLY, MOLLY 1512 ASHBY KEY WEST FL	<input type="checkbox"/> DELETE	
D	LANGLEY, WRIGHT 821 GEORGIA KEY WEST FL	<input type="checkbox"/> DELETE	

2.1 TITLE	D	2.2 NAME	Mary Lou Hughes	2.3 STREET ADDRESS	2615 Patterson Ave.	2.4 CITY - ST - ZIP	key West, FL.	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE		3.2 NAME		3.3 STREET ADDRESS		3.4 CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE		4.2 NAME		4.3 STREET ADDRESS		4.4 CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE		5.2 NAME		5.3 STREET ADDRESS		5.4 CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE		6.2 NAME		6.3 STREET ADDRESS		6.4 CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: *Alex Vega* Alex Vega DATE: 292-8179

CR2E037 (12/95)