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**Apr 15 1998 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N96000001295 (2)
1. Corporation Name

FLORIDA KEYS SENSIBLE PLANNING ALLIANCE, INC.



Principal Place of Business 3445 N.W. 7TH ST. MIAMI FL 33125		Mailing Address 3445 N.W. 7TH ST. MIAMI FL 33125		3. Date Incorporated or Qualified 03/05/1996	
2. Principal Place of Business 21 Suite, Apt. #, etc.		26. Mailing Address 26 Suite, Apt. #, etc.		4. FEI Number 65-0646973	
22 City & State		27 City & State		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24 Country		29 Country		7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
25		30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**LOPEZ-AGUIAR, HENRY A
3445 N.W. 7TH ST.
MIAMI FL 33125**

10. Name and Address of New Registered Agent

61 Name *OWES DON E*

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

63

64 City **FL** **65 Zip Code**

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	PSTD HILLIARD, RANDALL 2801 N. ROOSEVELT BLVD. KEY WEST FL 33040	1.1 TITLE	D CUELLAR, CLAUDIA 1121 ANDORA AVENUE CORAL GABLES, FL 33146
NAME	D DAVIS, EMILY 1111 LINCOLN ROAD #810 MIAMI BEACH FL 33139	1.2 NAME	
STREET ADDRESS	D MCCORMICK, JOSEPH 1111 LINCOLN ROAD #810 MIAMI BEACH FL 33139	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
		2.1 TITLE	
		2.2 NAME	
		2.3 STREET ADDRESS	
		2.4 CITY-ST-ZIP	
		3.1 TITLE	
		3.2 NAME	
		3.3 STREET ADDRESS	
		3.4 CITY-ST-ZIP	
		4.1 TITLE	
		4.2 NAME	
		4.3 STREET ADDRESS	
		4.4 CITY-ST-ZIP	
		5.1 TITLE	
		5.2 NAME	
		5.3 STREET ADDRESS	
		5.4 CITY-ST-ZIP	
		6.1 TITLE	
		6.2 NAME	
		6.3 STREET ADDRESS	
		6.4 CITY-ST-ZIP	

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.

SIGNATURE: *Randall Hilliard* **RANDALL HILLIARD** 4/3/98 305.673.5353
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0028116

CR2E037 (10/97)