

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 11 PM 1:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000034217 (7)**

1. Corporation Name

TAN KEYS ACCOMMODATIONS, INC.

Principal Place of Business

103400 OVERSEAS HIGHWAY
KEY LARGO FL 33037

Mailing Address

103400 OVERSEAS HIGHWAY
KEY LARGO FL 33037

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
05/02/1994

3a. Date of Last Report

4. FCI Number
650497330

Applied For
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

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

2. Principal Place of Business

21. **Key Largo**

Suite, Apt. #, etc.

22. City & State

23. **Key Largo, FL**

24. Zip

25. **MONROE**

2a. Mailing Address

26. **103400 o/s Hwy**

Suite, Apt. #, etc.

27. City & State

28. **33037**

29. **MONROE**

2b. Mailing Address

26. **103400 o/s Hwy**

Suite, Apt. #, etc.

27. City & State

28. **33037**

29. **MONROE**

9. Name and Address of Current Registered Agent

SHEPHERD, DONALD LEE
1500 OCEAN BAY DRIVE
KEY LARGO FL 33037

10. Name and Address of New Registered Agent

81. Name

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

83.

84. City

FL

85. Zip Code

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

Donald L. Shepherd

(NOTE: Registered Agent Signature required when registered)

DATE

04-06-95

12. OFFICERS AND DIRECTORS

TITLE	PRESIDENT
NAME	DONALD L. SHEPHERD
STREET ADDRESS	1500 OCEAN BAY DR. #H12
CITY ST ZIP	KEY LARGO, FL 33037
TITLE	VICE PRESIDENT
NAME	NANCY B. HOGNER
STREET ADDRESS	1500 OCEAN BAY DR. #H12
CITY ST ZIP	KEY LARGO, FL 33037
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY ST ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY ST ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY ST ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY ST ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY ST ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 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)(b), 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Donald L. Shepherd

DONALD L. SHEPHERD

04-06-95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

(Signature Page 2)