

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000005301

1. Entity Name

FLORIDA FUNDING OF THE KEYS, INC.

Principal Place of Business

99101 OVERSEAS HWY.
KEY LARGO FL 33037

Mailing Address

99101 OVERSEAS HWY.
KEY LARGO FL 33037

2. Principal Place of Business

102800 Overseas Hwy.
Suite, Apt. #, etc.

3. Mailing Address

102800 Overseas Hwy.
Suite, Apt. #, etc.

City & State

Key Largo FL

City & State

Key Largo FL

Zip

33037

Country

USA

Zip

33037

Country

USA

4. FEI Number

65-097792

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GREGG, MARK H
99101 OVERSEAS HWY.
KEY LARGO FL 33037

7. Name and Address of New Registered Agent

Name Edward J. Signor
Street Address (P.O. Box Number is Not Acceptable)
219 S. Ocean Shores Dr.
City Key Largo FL 33037

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GREGG, MARK H 99101 OVERSEAS HWY. KEY LARGO FL 33037	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN *1

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Edward J. Signor 219 S. Ocean Shores Dr. Key Largo FL 33037	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Bruce R. Oberg 70 N. Bounty Ln. Key Largo FL 33037	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/01
Date

305 451-0082
Daytime Phone #

FILED
Jun 05, 2001 8:00 am
Secretary of State

05-16-2001 90034 001 ***150.00

74332



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)