

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Mar 20 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 454482

(1)

1. Corporation Name

KEYHOLE REALTY, INC.



Principal Place of Business

225 WATER ST.
ONE ENTERPRISE CENTER, STE. 1235
JACKSONVILLE FL 32202

Mailing Address

225 WATER ST.
ONE ENTERPRISE CENTER, STE. 1235
JACKSONVILLE FL 32202-5185

2. Principal Place of Business

21 SAME

State, Apt. #, etc.

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2a. Mailing Address

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Suite, Apt. #, etc.

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3. Date Incorporated or Qualified
06/10/1974

3a. Date of Last Report
03/21/1996

4. FEI Number
59-2869926

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

g. Name and Address of Current Registered Agent

CONE JR., FRED M.
225 WATER ST.
ONE ENTERPRISE CENTER, STE. 1235
JACKSONVILLE FL 32202

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 understand with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1. TITLE
P
2. NAME
CONE, FRED M., JR.
3. STREET ADDRESS
1 ENTERPRISE CTR., #1235
4. CITY-STATE-ZIP
JACKSONVILLE FL
5. TITLE
D
6. NAME
CONE, FRED M., JR.
7. STREET ADDRESS
1 ENTERPRISE CTR., #1235
8. CITY-STATE-ZIP
JACKSONVILLE FL
9. TITLE
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100. CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE
2. NAME
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4. CITY-STATE-ZIP
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100. CITY-STATE-ZIP

14. I do 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 furnished 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; the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears on Block 12 or Block 13, if changed, as an attachment with an address.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/17/97

9043551235

0028188

CR2E034 (9/96)