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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

OCUMENT #

(1)

KEYHOLE REALTY, INC.

## **FILED** Feb 13 1998 8:00am Secretary of State

Principal Place of Business Mailing Address					r immit filban ferre defer finne ride filbie filme gener ment diete bener			
225 WATER S ONE ENTERP JACKSONVILI	RISE CENTER, STE. 1235	225 WATER ST. ONE ENTERPRISE CENTER. STE. 1235 JACKSONVILLE FL 32202			;	DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified 06/10/1974		
	ace of Business	2a, Mailing Address					lied For	
	O RIVERSIDE AVENUE	26 SAME AS ITEM 2					Applicable	
Suite, Apt		Strite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Required		
City & State 23 JAC	SONVILLE FL	City & State				6, Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip 24 322i	Country	Zip <b>29</b>	Cou	ntry		8. This corporation owes or has paid the current year Intal Personal Property Tax due June 30.		
	g, Name and Address of Curren	t Registered Agent				10. Name and Address of New Registered Agent		
CO	NE JR., FRED M.			81	Name			
225 WATER ST.				82		SAME Address (P.O. Box Number is Not Acceptable)		
ONE ENTERPRISE CENTER, STE. 1235				-		1050 RIVERSIDE AVENUE		
JA	CKSONVILLE FL 32202			63				
1			l	B4	City	les   Zin C	ode	
				اتا		ACKSONVILLE FL   322	04	
office or r	to the provisions of Sections 607,050, egistered agont, or both, in the State m familiar with, and accept the obliga	of Horida, Such change was	authorized	d by	the corpora	rporation submits this statement for the purpose of changing its ation's board of directors. I hereby accept the appointment as re-	registered egistered	
SIGNATURE	Signature, typest or printed forms of registered ago	otar of Mediupphiaha (NC	III Registeres	i Age	mi signalure requ	uired when reinstating) DATE		
12.	OFFICERS AND	) DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	IN 12	
TITLE	P	☐ DELETE	1.1 (1)	ILE		Change	Addition	
NAME	CONE, FRED M., JR.		1.2 NA	ME				
STREET ADDRESS 1 ENTERPRISE CTR., # 1235			1.0 OTHER FROMEGO		ADDRESS	1050 RIVERSIDE AVENUE		
CITY-ST-ZIP	JACKSONVILLE FL		. 1.4 CI	ry-S	T-ZIP	JACKSONVILLE FL 32204		
TITLE	D	DELETE 2.1		LE		<b>XX</b> Change	Addition	
NAME	CONE, FRED M., JR.		2.2 NA	ME				
STREET ADDRESS	1 ENTERPRISE CTR.,#1235		2381	REET	ADDRESS	1050 RIVERSIDE AVENUE		
CITY-ST-ZIP	JACKSONVILLE FL		2 4 0	TY - 5	ST-ZIP	JACKSONVILLE FL 32204		
TITLE		☐ DELETE	3.1,717	LE		☐ Change	Addition	
NAME			3.2 NA	ME				
STREET ADDRESS			3 3 ST	REET	ADDRESS			
CITY-ST-ZIP			3 4. C	17 - S	ST-ZIP			
TITLE		DELETE	4.1 []]	TLE.		☐ Change	Addition	

14. Thereby cortify that the information supplied with this lifting dons not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. If further certify that the information indicated on this annual report or supplicit indicated on 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 changing an althorhimous with an address.

4. 2 NAMÉ

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME 6.3 STREET AODRESS

54 CITY-ST-ZIP

DELETE

DELFTE

4.3 STREET ADDRESS 4.4 CITY - ST - ZIP

SIGNATURE.

NAME STREET ADDRESS

TITLE NAME

TITLE

NAME

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

FRED M CONE JR 2/9/98

904/355-1235

Change

Change

Addition

☐ Addition