Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90018 027 ***158.75

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 484264

1. Corporation Name

ISLAND+	West investment (CORPORATION									
Principal Place	e of Business	Mailing Ad	Idress				- + 198411 #1861 18131 01010 11810 \$1113 018		IIC BERKE REGEL A	1011 01011 1001	
1213 14TH STRI KEY WEST FL	EET	1213 14TH	1213 14TH STREET KEY WEST FL 33040				DO NOT WRITE IN THIS SPACE				
							3. Date Incorporated or Qualifed				1
							09/11/1975				
2. Principal Pl	lace of Business	2a. Mailing	Address				4. FEI Number		Ар	plied For	
21		26				_	59-1638922		No	t Applicable	
Suite, Apt.	#, etc.	Suite,	Suite, Apt. #, etc.			5. Certifcate of Status Desired	,	\$8.75 A Fee Re			
- City & State	ء جيونسيستونسيده		State	~ ~~ =~	. سنه	.ب ر سور د	6. Election Campaign Financing		~\$5:00	May Be	~
23		28					Trust Fund Contribution		Added t	o Fees	
Zip	Country	Zip	_	Cou	ntry		8. This corporation owes the current y			п.,	
24	25	29		30			Personal Property Tax.		Yes	□No	ł
	9. Name and Address of	f Current Registered A	gent		04		10. Name and Address of New Regis	terea A	igent		┨
HOD	CAN UHOU I				81	Name					
	IGAN, HUGH J					Street Addre	ddress (P.O. Box Number is Not Acceptable)				1
	WHITEHEAD STREET		,								-
KEY	WEST FL				83						l
	•				1	City		FL	85 Zip (
office or to	to the provisions of Sections egistered agent, or both, in the familiar with, and accept the	ie State of Florida. Such	i change was au	tnorizea	DV ti	named corpo he corporation	ration submits this statement for the purp n's board of directors. I hereby accept the	ose of o appoin	changing its tment as re	registered gistered	
SIGNATURE	•	•									-
	Signature, typed or printed name of regi			<u> </u>	Agent	signature required	when reinstating) D ADDITIONS/CHANGES TO OFFICE	ATE	DIDECTO	DC IM 12	1 8
12.		ERS AND DIRECTORS	DELETE	13.	n e		ADDITIONS/CHANGES TO OFFICE	KS ANI	☐ Change	Addition	;
TITLE	- U										
NAME	HARDING, RICHARD A				2 NAME						8
STREET ADDRESS	1425 WINFIELD	200			1.3 STREET ADDRESS						}
CITY-ST-ZIP	FT COLLINS, COLO 000	100	□ DELETE		1.4 CITY-ST-ZIP 2.1 TITLE			•	Change	Addition	1 8
TITLE	VD		_								
NAME	HARDING, KENNETH E		2.2 NAME 2.3 STREET ADDRESS								
STREET ADDRESS	501 W 1ST STREET										
CITY-ST-ZIP	OGALLALA, NE 00000	VE UUUUU T DELETE		2.4 CITY-ST-ZIP 3.1 TITLE					Change	Addition	1
TITLE	PD				3.2 NAME						. _
NAME	HARDING, KENNETH L					ADDRESS		•			
STREET ADDRESS	1213 14TH STREET			ı							1
CITY-ST-ZIP	KEY WEST, FL 00000		[] DELETE	4.1 TT	TY-ST	-214			Change	☐ Addition	1
TITLE	D HADDING IFFEREN		- Deterie	4.2 N						_	
NAME	HARDING, JEFFREY A					ADDDESC					1
STREET ADDRESS						ADDRESS					}
CITY-ST-ZIP	TERRY MT		_	4.4 CITY-ST-ZIP 5.1 TITLE				Change	☐ Addition	1	
TITLE		· . —			5.2 NAME						
NAME	HILLER, ROBERT					ADDRESS					
STREET ADDRESS	P O BOX 905			•	TY-ST-	\ \					-
CITY-ST-ZIP	TERRY MT		☐ DELETE	6.1 17				,	Change	Addition	1
TITLE				6.2 NA							

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 emowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, or by a attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CiTY-ST-ZIP