

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # 499687

(2)

1. Corporation Name

KEYES BUILDING CORPORATION

Principal Place of Business

ONE SE THIRD AVE
11TH FLOOR
MIAMI FL 33131
US

Mailing Address

ONE SE THIRD AVE
11TH FLOOR
MIAMI FL 33131
US

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AND
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21		26		03/24/1976		05/01/1994	
22		27		4. FEI Number		Applied For	
23		28		59-1670843		Not Applicable	
24		29		5. Certificate of Status Desired		8.75 Additional Fee Required	
25		30		6. Election Campaign Financing Trust Fund Contribution		5.00 May Be Added to Fees	
26		31		7. This corporation has liability for intangible tax under S. 199.032 Florida Statutes		Yes ☒ No ☐	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FREDLANDER, BRUCE D.
ONE SE THIRD AVE
SUITE 1101
MIAMI FL 33131

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	FL
86	Zip Code

11. Pursuant to the provisions of Sections 607.0501 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

Signature of Registered Agent (Required)

Signature of Registered Agent (Required)

(87)

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
1. TITLE	DP	1.1 TITLE	☐ Change ☐ Addition
2. NAME	SMITH, FRED STANTON	2.1 NAME	
3. STREET ADDRESS	ONE SE THIRD AVE 11TH FLOOR	3.1 STREET ADDRESS	
4. CITY, ST, ZIP	MIAMI, FL 00000	4.1 CITY, ST, ZIP	
5. TITLE	TD	5.1 TITLE	☐ Change ☐ Addition
6. NAME	SHAW, RAY M	6.1 NAME	
7. STREET ADDRESS	ONE SE THIRD AVE 11TH FLOOR	7.1 STREET ADDRESS	
8. CITY, ST, ZIP	MIAMI, FL 00000	8.1 CITY, ST, ZIP	
9. TITLE	VS	9.1 TITLE	☐ Change ☐ Addition
10. NAME	SHAW, RAY M	10.1 NAME	
11. STREET ADDRESS	ONE SE THIRD AVE 11TH FLOOR	11.1 STREET ADDRESS	
12. CITY, ST, ZIP	MIAMI, FL 00000	12.1 CITY, ST, ZIP	
13. TITLE	DV	13.1 TITLE	☐ Change ☐ Addition
14. NAME	PAPPAS, TIMOTHY D.	14.1 NAME	
15. STREET ADDRESS	ONE SE THIRD AVE 11TH FLOOR	15.1 STREET ADDRESS	
16. CITY, ST, ZIP	MIAMI FL	16.1 CITY, ST, ZIP	
17. TITLE		17.1 TITLE	☐ Change ☐ Addition
18. NAME		18.1 NAME	
19. STREET ADDRESS		19.1 STREET ADDRESS	
20. CITY, ST, ZIP		20.1 CITY, ST, ZIP	
21. TITLE		21.1 TITLE	☐ Change ☐ Addition
22. NAME		22.1 NAME	
23. STREET ADDRESS		23.1 STREET ADDRESS	
24. CITY, ST, ZIP		24.1 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 1.09 (2)(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. I am an officer or director of the corporation or the registrar or transfer agent or one of the persons named in this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this document, or on an attachment with an address.

SIGNATURE:

Ray M. Shaw

Ray M. Shaw

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/95

305-371-3592

Date

Telephone Number