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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # 545643

(9)

SUMMERLAND KEY PROPERTIES, INC.

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FILED Apr 04 1997 8:00am Secretary of State



Principal Plac	ce of Business	Mailing Address				I IDDURI RIIHI BIRRI RIIHA FIRM BADDO IIII DIRII DIRII BIRRI FIRMI DIRII DIRII			
1219 NORWOOD AVE CLEARWATER FL 34616		1219 NORWOOD AVE CLEARWATER FL 34616-4	*						
						3. Date Incorporated or Qualified 09/19/1977	3a. Date of Le		
Principal Place of Business		2a. Mailing Address				4. FEI Number	<u></u>	Applied For	
		26						Not Applicab	
Suite, Apt	#, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired		5 Additional Required	
City & Sta	ite	City & State				Election Campaign Financing Trust Fund Contribution		00 May Be	
Zip	Country	Zip	Co	untry		8. This corporation has liability for ig	tangible tax und	er s. 199.032,	
	25	29	30			Florida Statutes	Yes No		
	9. Name and Address of Curre	ent Registered Agent		Ţ.,		10. Name and Address of New Reg	istered Agent		
	NDLER, JEFFREY L.			81	Name				
777 BRICKELL AVE STE 1200				82	Street Add	dress (P.O. Box Number is Not Acceptable	e)	***************************************	
MIA	AMI BEACH FL 33131	CHANGE -	CHANGE			701 BRICKELL AVE - SUITE 2000			
				83					
				84	City		85	Zip Code	
							FL [°°]		
2.		ND DIRECTORS	13	•	ni signature requ	uired when reinstaling) ADDITIONS/CHANGES TO OFFIC			
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AME	CRANE, STEWART R.		- 8	NAME					
PREET ADDRESS	1850 LAUREL ROAD WINTER PARK FL				ADDRESS	227 VIRGINIA DR			
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AME	MCKAY, S.J.	ביין מרנכונ		NAME	i		UL CIA	ויטטא ביין	
rant Eree Laddress	ANA MARWAAN MEMBE		- 1		ADDRESS	P O DOX 170 - WAIPAP	ROAD		
(14 - \$1 - 70) (14 - \$1 - 70)	CLEARWATER FL			CITY-S		KERIKERI NEW ZEALAND	-		
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ME	CAMPBELL, DORIS H.		3.2	NAME	ĺ				
REET ADDRESS	1219 NORWOOD AVE		3.3	STREET	ADDRESS				
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4. 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 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DORISH CAMPBELL

1PBELL 731/97

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