

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

APPROVED
AND
FILED

96 MAY -1 AM 10:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 572231

1. Corporation Name
FIRST PROPERTY COMPANY OF THE KEYS, INC.

Principal Place of Business

Mailing Address

800001803528

-05/01/96--01090--011

****208.75 ****208.75

3. Date Incorporated or Qualified
5/17/78

3a. Date of Last Report
3/30/95

2. Principal Place of Business

21 FDIC- 100 Colony Sq. Box 68

2a. Mailing Address

26 FDIC - 100 Colony Sq. Box 68

4. FEI Number

59-1873117

Applied For

Not Applicable

Suite, Apt. #, etc

Suite, Apt. #, etc

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

22 Ste. 2200

27 Ste. 2200

6. Election Campaign Financing

☐ \$5.00 May Be
Added to Fees

City & State

City & State

8. This corporation has liability for intangible tax under s. 199.032
Florida Statutes ☐ Yes ☒ No

23 Atlanta, GA

28 Atlanta, GA

Zip 30361

Zip 30361

Country USA

Country USA

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 South Pine Island Road
Plantation, FL 33324

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

SIGNATURE

Signature typed or printed name of registered agent and title (Applicable)

(NOTE: Registered Agent Signature required when not stating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

1.1 TITLE D/P ☒ Change ☒ Addition
1.2 NAME Charles P. Farrell, Jr.
1.3 STREET ADDRESS 100 Colony Sq. Box 68 Ste. 2200
1.4 CITY- ST- ZIP Atlanta, GA 30361

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

2.1 TITLE D/VP/AS ☒ Change ☒ Addition
2.2 NAME Patricia J. Ray
2.3 STREET ADDRESS 100 Colony Sq. Box 68 Ste. 2200
2.4 CITY- ST- ZIP Atlanta, GA 30361

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

3.1 TITLE D/S/T ☒ Change ☒ Addition
3.2 NAME John P. Rossetti
3.3 STREET ADDRESS 100 Colony Sq. Box 68 Ste. 2200
3.4 CITY- ST- ZIP Atlanta, GA 30361

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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 119.07(3)(k), 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Charles P. Farrell, Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Charles P. Farrell, Jr. - President

4-18-96

404 870 7010

Date

Daytime Phone

CR2E034 (12/95)