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Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # **696640** **(2)**

1. Corporation Name
KEY LARGO GROUP, INC.

Principal Place of Business	Mailing Address
40 PEARL STREET NORTHWEST SUITE 430 GRAND RAPIDS MI 49503 US	ONE EAST FOURTH STREET S800 CINCINNATI OH 45202 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/28/1981

2. Principal Place of Business 21 One East Fourth Street	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Cincinnati, OH	City & State 28
Zip / Country 24 45202 / 25 US	Zip / Country 29 / 30

4. FEI Number: 59-1263251 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
LUBAN, KENNETH A., ESQUIRE 31 OCEAN REEF DRIVE SUITE C-300 KEY LARGO FL 33037	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P HEWETT, CHRISTOPHER B 40 PEARL STREET NORTHWEST GRAND RAPIDS MI	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VAS GRAFE, KARL J. ONE EAST FOURTH ST CINCINNATI OH	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP		☒ Change ☐ Addition 45202
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VS KENNEDY, JAMES C ONE EAST FOURTH ST CINCINNATI OH	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☒ Change ☐ Addition 45202
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D EVANS, JAMES E ONR EAST FOURTH ST CINCINNATI OH	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	PD	☒ Change ☐ Addition 45202
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V MISCHELL, THOMAS E 1 E 4TH ST CINCINNATI OH	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☒ Change ☐ Addition 45202
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VTD RUNK, FRED J 1 E 4TH ST CINCINNATI OH	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☒ Change ☐ Addition 45202

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 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: Thomas E. Mischell Thomas E. Mischell
Vice President 4/29/98 (513) 579-2171

CR2E034 (10/97)