

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 698887 (7)

1. Corporation Name

KEY WEST DISCOVERY, INC.



Principal Place of Business

Mailing Address

~~628 FLEMING ST.~~
P.O. DRAWER 1689
KEY WEST FL ~~33040~~ 33041

~~628 FLEMING ST.~~
P.O. DRAWER 1689
KEY WEST FL ~~33040~~ 33041

3. Date Incorporated or Qualified
08/13/1981

3a. Date of Last Report
01/18/1995

2. Principal Place of Business

2a. Mailing Address

21 P.O. DRAWER 1689
Suite, Apt. #, etc.

26 P.O. DRAWER 1689
Suite, Apt. #, etc.

22 City & State
KEY WEST FL

27 City & State
KEY WEST FL

23 Zip
33041

Country
US

28 Zip
33041

Country
US

4. FEI Number
59-2120620

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 has liability for income 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

STRICKLAND, RANDY
~~628 FLEMING ST.~~ 1620 #4 BERTHA ST
KEY WEST FL 33040

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

1620 #4 BERTHA ST

84 City

KEY WEST

FL

85 Zip Code

33040

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

Randy Strickland

6/12/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME
VD
FINNEGAN, JAMES A
STREET ADDRESS
~~628 FLEMING ST.~~
CITY - ST - ZIP
KEY WEST, FL 00000

TITLE ☐ DELETE

NAME
PD
STRICKLAND, RANDY
STREET ADDRESS
~~628 FLEMING ST.~~
CITY - ST - ZIP
KEY WEST, FL 00000

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

301 NW 93 AVE
CORAL SPRINGS, FL 33071

1620 #4 BERTHA ST
KEY WEST, FL 33041

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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE:

Randy Strickland

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-12-96 305
294-8850

CR2E034 (3/96)