

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Aug 05 1997 8:00am
Secretary of State

DOCUMENT # 710168 (6)
1. Corporation Name
KEY LARGO LIONS BUILDING CORPORATION, INC.,

Principal Place of Business Mailing Address
PO BOX 932 PO BOX 932
KEY LARGO FL 33037 KEY LARGO FL 33037



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 PO BOX 5		2a. Mailing Address 26 PO BOX 5		3. Date Incorporated or Qualified 01/05/1966		3a. Date of Last Report 03/01/1996	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27		4. FEI Number 59-2356586		Applied For Not Applicable	
City & State 23 KEY LARGO FL		City & State 28 KEY LARGO FL		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
Zip 24 33037		Country 25 MONROE		Country 30 MONROE		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	
						\$5.00 May Be Added to Fees	
						8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

GALLUCCIO, DOMINIC
103620 OVERSEAS HIGHWAY
KEY LARGO FL 33037

10. Name and Address of New Registered Agent

81 Name ISABEL M. MESA
82 Street Address (P.O. Box Number Is Not Acceptable)
1124 GULFSTREAM LANE
83 KEY LARGO,
84 City FL 85 Zip Code 33037

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE ISABEL M. MESA TREASURER
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE AUG 1st 1997

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	T	1.1 TITLE	T
NAME	GALLUCCIO, DOMINIC	1.2 NAME	ISABEL M. MESA
STREET ADDRESS	103620 OVERSEAS HIGHWAY	1.3 STREET ADDRESS	1124 GULFSTREAM LANE
CITY-ST-ZIP	KEY LARGO FL	1.4 CITY-ST-ZIP	KEY LARGO, FLORIDA 33037
TITLE	D	2.1 TITLE	D
NAME	BERNSTEIN, PAUL	2.2 NAME	JUDITH MITCHELL
STREET ADDRESS	110 FIRST TERRACE	2.3 STREET ADDRESS	2 BOWEN DRIVE
CITY-ST-ZIP	KEY LARGO FL	2.4 CITY-ST-ZIP	KEY LARGO, FLORIDA 33037
TITLE	D	3.1 TITLE	D
NAME	GOW, DAVID	3.2 NAME	PAUL BERNSTEIN
STREET ADDRESS	32 POMPANO AVENUE	3.3 STREET ADDRESS	110 FIRST TERRACE. KEY LARGO FL.
CITY-ST-ZIP	KEY LARGO FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	D
NAME	SANTE, CHRIS	4.2 NAME	DAVID GOW
STREET ADDRESS	300 ATLANTIC AVE. SUITE 10	4.3 STREET ADDRESS	32 POMPANO AVENUE
CITY-ST-ZIP	KEY LARGO FL 33037	4.4 CITY-ST-ZIP	KEY LARGO, FLORIDA 33037
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

FAX 305 451-0684