FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 APR 27 AM 9:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 722323 (3)

1. Corporation Name
ANGELFISH CAY CONDOMINIUM CHALETS, NO. 3, INC.

Principal Place of Business	Mailing Address
120 ANCHOR DR. NORTH KEY LARGO FL 33037	100 ANCHOR DR. #157 NORTH KEY LARGO FL 33037

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/27/1971
3a. Date of Last Report: 04/11/1994
4. FEI Number: 59-1507262 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 120 Anchor Dr.	26 100 Anchor Dr. #157
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Key Largo, FL	City & State 28 Key Largo, FL
Zip 24 33037 Country 25 Monroe	Zip 29 33037 Country 30 Monroe

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — $68.75 Supplemental Fee Not Required
8. *This corporation has liability for intangible 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
BLACK, JANE HOMEPORT MANAGEMENT INC. OCEAN REEF CLUB, MAILROOM BOX 157 KEY LARGO FL 33037	81 Name: Parker A. Black 82 Street Address (P.O. Box Number is Not Acceptable): 100 Anchor Dr. #157 83 84 City: Key Largo FL 85 Zip Code: 33037

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: Parker A Black 4/3/95
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	VPD	11 TITLE	D	☐ Change ☐ Addition
NAME	PALM, CATHY	12 NAME	Palm, Cathy	
STREET ADDRESS	ORC BOX 157	13 STREET ADDRESS	100 Anchor Dr. #157	
CITY-ST-ZIP	KEY LARGO, FL 00000	14 CITY-ST-ZIP	Key Largo, FL 33037	
TITLE	DP	21 TITLE	D	☑ Change ☐ Addition
NAME	CARROLL, RICHARD	22 NAME	Carroll, Richard	
STREET ADDRESS	ORC BOX 157	23 STREET ADDRESS	100 Anchor Dr. #157	
CITY-ST-ZIP	KEY LARGO, FL 00000	24 CITY-ST-ZIP	Key Largo, FL 33037	
TITLE		31 TITLE	D	☑ Change ☐ Addition
NAME	MCMENAMIN, RONALD	32 NAME	McMenamin, Ronald	
STREET ADDRESS	ORC BOX 157	33 STREET ADDRESS	100 Anchor Dr. #157	
CITY-ST-ZIP	KEY LARGO, FL 00000	34 CITY-ST-ZIP	Key Largo, FL 33037	
TITLE		41 TITLE	D	☑ Change ☐ Addition
NAME	BLACK, PARKER	42 NAME	Black, Parker	
STREET ADDRESS	ORC BOX 157	43 STREET ADDRESS	100 Anchor Dr. #157	
CITY-ST-ZIP	KEY LARGO FL	44 CITY-ST-ZIP	Key Largo, FL 33037	
TITLE	D	51 TITLE		☐ Change ☐ Addition
NAME	E. HAMBELTON, WELBROWN	52 NAME		
STREET ADDRESS	100 ANCHOR DR. #157	53 STREET ADDRESS		
CITY-ST-ZIP	N. KEY LARGO FL 33037	54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 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)(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 11 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Parker A Black 4/3/95 (305)367-3945
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0005014