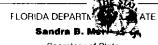
FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION ANNUAL REPORT** 





Secretary of State **DIVISION OF CORPORATIONS** 

1998 **DOCUMENT** #

(6)

THE KEY PLAYERS, INC.

## **FILED** Jun 25 1998 8:00am Secretary of State

Principal Place of Business Mailing Address										
187 COCOA DR TAVERMER FL 33070 US  2. Principal Place of Business 21 Suite, Apt. #, etc.		P O BOX 181 KEY LARGO FL 33037 US				3. Date Incorporated or Qualified  11/15/1978  4. FEI Number  Applied For				
		2a. Mailing Address			59-1843231  5. Certificate of Status Desired			Not Applicable  \$8.75 Additional Fee Required		
		Suite, Apt. #, etc	Suite, Apt. #, etc.				Election Campaign Financing Trust Fund Contribution	ng \$5.00 May Be Added to Fees		
23	City & State	City & State			7. Is this nonprofit corporation a homeowners association?  Yes No					
24	Zip Country 25	Zip 29	30 Co.	intry				Yes	ar Intangible No	
Name and Address of Current Registered Agent						10.	Name and Address of New Registered	Agent		
				81	Name					
MIKLAS, JOE 86000 OVERSEAS HIGHWAY					Street Addre	Address (P.O. Box Number is Not Acceptable)				
P.O. BOX 386				83			**	_	<u> </u>	
	ISLAMORADA, FL. FL 33036				City	FL 85 Zip Code			Zip Code	
11	<ul> <li>Pursuant to the provisions of Sections 617.03 office or registered agent, or both, in the Sta agent. I am familiar with, and accept the obl</li> </ul>	te of Florida, Such change.	was authorized	d by	the corporate	ooration tion's b	n submits this statement for the purpose coord of directors. I hereby accept the app	f chang pointmer	ing its registered nt as registered	

agent, i am lamiliar with, and accept the obligations of, section 617.0503, Florida Statutes.													
SIGNATURE Signature typind or printed name of registered agent and title if appricable (NOTE: Registered Agent signature required when reinstating)  DATE													
12.	OFFICERS AND DIR	ECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	IN 12								
TITLE	P	DELETE	1.1 TELE	P Change	Addition								
NAME	GALLAGHER, SUSAN		1.2 NAME	MILLER, DEBORAH									
STREET ADDRESS	167 COCOA DR		1.3 STREET ADDRESS	P.O. BOX 837 /NH									
CITY-ST-ZIP	TAVERNIER FL		1.4 CiTY - ST - ZIP	TAYERNIER, FL. 33070									
TITLE	VP	☐ DELETE	2.1 TITLE	Change	Addition								
NAME	MILLER, DEBORAH		2.2 NAME	DAVID SCHNEIDER									
STREET ADDRESS	P O BOX 837 N/A		2.3 STREET ADDRESS	265 CHARLEMAGNE BLVD									
CITY-ST-ZIP	TAVERNIER FL		2. 4 CITY - ST - ZIP	KEY LARGO, FL. 33037									
TITLE	8	DELETE	3.1 TITLE	<b>G</b> Change	Addition								
NAME	<b>GA</b> LLAGHER, SUSAN		3.2 NAME	GALLAGHER SUSAN									
STREET ADDRESS	167 COCOA DRIVE		3.3 STREET ADDRESS	KT COCOA DRIVE									
CITY - ST - ZIP	TAVERNIER FL 33070		3.4. CITY - ST - ZIP	TAVERNIER, FL. 33070									
TITLE	D	☐ DELETE	4.1 TITLE	Change	Addition								
NAME	DOWTY, RICHARD		4. 2 NAME	BUTLER, TOM 441 BAHIA AVE									
STREET ADDRESS	139 BAYVIEW DR		4.3 STREET ADDRESS	441 BAHIA AVE									
CITY-ST-ZIP	KEY LARGO FL 33037		4.4 CITY-ST-ZIP	KEYLARGO, FL. 33037									
TITLE	D	☐ DELETE	5.1 TITLE	D McDONALD, MARX Change LIZ N. SILVER CIRCLE	☐ Addition								
NAME	MCDONALD, MARY I		5.2 NAME	I ID N SILVER CIRCLE									
STREET ADDRESS	BOX 1072 N/A		5.3 STREET ADDRESS	V2V 1 1 200 51 33037									
CITY-ST-ZIP	TAVERNIER FL		5.4 CITY - ST - ZIP	KEY LARGO, FL. 33037									
TITLE	D	☐ DEL€TE	6.1 TITLE	D GLAND BRANIEV Change	Addition								
NAME	MILLER, DEBORAH		6.2 NAME	D SHANK, BRADLEY Grange	:								
STREET ADDRESS	P.O. BOX 837 N/A		6.3 STREET ADDRESS										
CITY - ST - 7IP	TAVERNIER FL 33037		6.4 CITY - ST - 7IP	KEV LARGO EL 33070									

14. Thereby 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.