## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F14871

(0)

KEY WAY TRUCKING, INC.

## **FILED** Jan 30 1998 8:00am Secretary of State



Principal Place of Business Mailing Address M M 30.5 P O BOX 431543 BEHIND ACE HOWR BIG PINE KEY FL 33043-1543 BIG PINE KEY FL 33043 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/14/1981 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-2053416 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Regulred City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zìp Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. X Yes 30 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent Name KEY. MELODY 17170 LA BRISA COURT Street Address (P.O. Box Number is Not Acceptable) SUGARLOAF SHORES FL 33042 83 84 City 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 Signature, typed or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE Change Addition 1.1 TITLE KEY, DANIEL NAME 1.2 NAME 17170 LA BRISA COURT STREET ADDRESS 1.3 STREET ADDRESS SUGARLOAF SHORES FL CITY-ST-ZIP 1.4 CITY-ST-ZIP TITI F DELETE 2.1 TITLE Change Addition KEY, MELODY NAME 2.2 NAME 17170 LA BRISA COURT STREET ADDRESS 2 3 STREET ADDRESS SUGARLOAF SHORES FL CITY - ST - ZIP 2. 4 CITY - ST- ZIP TITLE DELETE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY-ST-ZIP TITLE DELETE Change Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE 5.1 TITLE ☐ Change Addition | NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP

14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f), 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.

1-19-98 305-872-9299

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