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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 02 1997 8:00am

Secretary of State

Madlan

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # F93000002581 (7)

OLD KEY STONE CHURCH, INC.

Principal Place of Business Mailing Address							
OLD KEYSTONE CHURCH INC. 330 JULIA BTREET KEY WEST FL 33040 US		OLD KEYSTONE CHURCH INC. 330 JULIA STREET KEY WEST FL 33040-7512 US					
				<ol> <li>Date incorporated or Qualified 05/15/1993</li> </ol>	3a. Date of Last Report 06/07/1996		
2. Principal Place of Business		2a. Mailing Address					Applied For
21 Suite, Apt. #, etc.		Suite, Apt. #, etc.		61-1238107	<b>*</b>	Not Applicable  \$8.75 Additional	
22		27		5. Certificate of Status Desired	1 1	The Required	
City & State		City & State		6. Election Campaign Financing	i. Election Campaign Financing \$5.00 May Bo		
23		28		Trust Fund Contribution		ded to Fees	
Zip	Country	Z <sub>I</sub> p	Count	ry	8. This corporation has liability for i		dor s. 199.032,
24]	9. Name and Address of Curre	129	30]			Yes No	
UII 1		in negistered Agent		Name	10. Name and Address of New Re	Jisterea Agent	
WILLIS, TERESA A \$30 JULIA STREET							
	WEST FL 33040		<b>82</b>   Str		Address (P.O. Box Number is Not Acceptable)		
*161	THOU I E GOOTO		В	3	****		
			В	4 City		FL  85	Zip Code
SIGNATURE	m familiar with, and accept the oblig	ont and filler applicable (NO)			red ween relistating)	DATE	
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		
TITLE '	VD	DELETE	111111			L Cha	inge [] Addition
NAME PERCET ADDRESS	WILLIS, TERRY 148 RIDGEWOOD DRIVE		1.2 NAM				
STREET ADDRESS CITY-ST-ZIP	BOWLING GREEN KY			E1 ADDRESS			
TITLE	SD	☐ DELETE	14 City 2 1 1ii ( E			Cha	inge Addition
NAME	WILLIS, TERESA A		2.2 NAM	:			• —
STREET ADDRESS	330 JULIA STREET		2.3 \$1RE	ET ADDRESS			
CITY-ST-ZIP	KEY WEST FL		2 # Cfl Y	- S1 - ZIP			
TITLE	TD	☐ DELETE	31 11111			☐ Cha	inge 🔲 Addition
NAME	SMITH, ERIC		3.2 NAM	•			
STREET ADDRESS	330 JULIA STREET KEY WEST FL		i i	ET ADDRESS			
CITY-ST-ZIP TITLE	VEL MESI LE	DELETE	3.4. C(1)Y			Cha	Addition
NAME		DETER	4.1 IIILI 4.2 NAM			L. GIA	inge [_] Addition
STREET ADDRESS				: E1 ADDRESS			
CITY-ST-ZIP			4.4 CITY				
TITLE		☐ DELF1E	5.1 THTLE			Cha	nge Addition
NAME			5.2 NAMI				
STREET ADDRESS			5.3 \$1RE	EL ADDRESS			
CITY-ST-ZIP		The state	5.4 CITY	-S1 - 7IP			
TITLE		☐] DELETE	. 6.1 THILF			L Cha	inge Addition
NAME STORES ADDRESS			6.2 NAM				
STREET ADDRESS CITY-ST-ZIP			1	1 ADDRESS			
14. I do hereb	by certify that the information supplic	ed with this filing does not quali-	6.4 City fy for the ex	emotion state	d in Section 119.07(3)(i), Florida Statutes	s. I further certify	that the
informatio I am an of appears ir	n indicated on this annual report or flicer or director of the corporation on h Block 12 or Block 13 if changed, c	supplemental annual report is t rithe receiver or trustee empow or on an attachment with an add	rue and ac- vered to exe dress.	curate and tha cute this repo	at my signature shall have the same lega ort as required by Chapter 607, Florida S	effect as if mad latutes, and that	e under oath; that my name