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

29

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

(1)

LEGG ADVERTISING OF THE KEYS, INC.

Principal Place of Business	Mailing Address		
· '	· ·		
P.O. BOX 4601 HIALEAH FL 33014	P.O. BOX 4601 HIALEAH FL 33014	DO NOT WRITE IN THIS SPACE	
		 Date Incorporated or Qualified 12/15/1983 	
2. Principal Place of Business	2a, Mailing Address	4. FEI Number	Applied For
21	26	59-2430046	Not Applica
Suite, Apt. #, etc.	Suite, Apt #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State	6. Election Campaign Financing	\$5.00 May Be

9. Name and Address of Current Registered Agent PAPY, CHARLES C., III 201 ALHAMBRA CIRCLE SUITE 502 **CORAL GABLES FL 33134**

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Zip

	6	3. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Country	8	This corporation owes or has paid t Personal Property Tax due June 30.				
	1(). Name and Address of New Regis	tered Agent			
81	Name					
82	82 Street Address (P.O. Box Number is Not Acceptable)					
83						
84	City		FL 85 Zip Code			

FILED

May 05 1998 8:00am

Secretary of State

Applied For Not Applicable

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, typod or printed name of registered agent and title it app	MOTE B	lonistated Apont pionet up to	oured when reinstating) DATE	
12.	OFFICERS AND DIRECTORS		II : Registered Agent signature required when reinstating) DATE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		S IN 12
TITLE	P	DELETE	1.1 TITLE	Change	Addition
NAME	LEGG, ELMO T.		1.2 NAME		
STREET ADDRESS	314 E. GLENOAKS BLVD.		1.3 STREET ADDRESS		
CITY-ST-ZIP	GLENDALE CA		1.4 CITY - ST - ZIP		i
TITLE	V	DELETE	2.1 TITLE	Change	☐ Addition
NAME	COOPER, ROY		2.2 NAME		
STREET ADDRESS	4000 TOWERSIDE TERRACE #2008		2.3 STREET ADDRESS		
CITY-ST-ZIP	N MIAMI FL		2. 4 City - St - ZiP		
TITLE	ST	DELETE	3 1 TITLE	Change	Addition Addition
NAMÉ	CAMPBELL, NANCY K.		3.2 NAME		
STREET ADDRESS	314 E GLENOAKS BLVD		3.3 STREET ADDRESS		
CITY-ST-ZIP	GLENDALE CA		3.4. CITY - ST - ZIP		<u> </u>
TITLE		DELETE	4.1 TITLE	☐ Change	Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS	•	
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE	☐ Change	☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY+ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE	Change	Addition
NAME			6.2 NAME		
STREET ADDRESS	/		6.3 STREET ADDRESS		

of qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information of and accurate and that my signature shall have the same legal effect as if made under oath; that I am an owered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in 14. I hereby certify that the information supplied with indicated on this annual report or suppliemend at officer or director of the corporation of the vicelve Block 12 or Block 13 if changed, or on an utachy

4/14/58