FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

STREET ADDRESS

STREET ADDRESS

CiTY-ST-ZiP

CITY-ST-ZIP

TITLE

NAME

DOCUMENT # H17507 (5) 1. Corporation Name KEYS INSURANCE AGENCY OF MONROE COUNTY, INC.													
									A HARIOSO AADI IJAKA KA)21 B)(1) 21	lili (fil) albis nis	II 4 (6 4) 8 1	IJII B erie bibio ikoo
Principal Place	of Business		Mailing Ada	kono	<u>-</u>								
	RSEAS HWY		Mailing Address P.O. BOX 500080 MARATHON FL 33050										
STE 43	-												
MARATHON FL 33050 US			US						3 Data Incorporated or Qualified		Tel Bill	(1 5	
"								3	. Date Incorporated or Q 08/21/1984	uaillea	3a. Date o	1/25/1	
⊢	ace of Business		2a. Mailing					4.	, FEI Number		.L		Applied For
21		· · · · · · · · · · · · · · · · · · ·		<u>. Вох</u>	<u> 500</u>	8	90		59-2471020				Not Applicable
Suite, Apt.	#, etc.		Suite, A	pt. #, etc.				5.	Certificate of Status De	sired			Additional
City & State	e		City & S	tate				-	Election Campaign Fina	noino			Required
23			28					10.	Trust Fund Contribution				O May Be of to Fees
Zıp	C	ountry	Zιρ		Count	try		8.	. This corporation has lia	oility for i	intangible tax		
24	25	44	29 33 00		30				Florida Statutes	_	□ No		
9. Name and Address of Current Registered Agent MARTIN-VEGUE, DEREK 5800 OVERSEAS HIGHWAY #43						31	Name	10	10. Name and Address of New Registered Agent				
						82 Street Address			O. Box Number is Not A	cceptab	le)		
	THON FL 33050				8	13		······					
						14	City				FL		p Code
		Sections 607.0502 ar in the State of Florida. obligations of, Section			s, the above d by the co	rpc	amed corporation's bo	oration s ard of d	submits this statement fo lirectors. I hereby accept	the pur the appo	pose of chang pintment as re	ing its r gistered	registered office I agent. I am
SIGNATURE													
- 40	Signature, typed or printed	name of registered agent and		(NOT)	E: Registered Ag	gent	signature requi	red when n			DATE		
12.	S	OFFICERS AND D	DELETE		13.				ADDITIONS/CHANGES	TO OFFI			
NAME	MARTIN-VE	GUE, ANN	L	DEECIE	1. 1 IIILI 1.2 NAMI						U	Change	☐ Addition
STREET ADDRESS	FOOD OVERDELAN LINEY A			3			ADDRESS						
CITY-ST-ZIP	MARATHON	l FL			1.4 CITY	-	11						
TITLE	P			DELETE	2. 1 7)TL	_						Change	Addition
NAME		GUE, DEREK			2.2 NAME	E					_	·	_
STREET ADDRESS		SEAS HWY., #43			2.3 STREE	ET A	ADDRESS						
CHTY-ST-ZIP	MARATHON	FL 			2.4 CITY -		- ZIP						
TITLE				DELETE	3. 1 TITLE							Change	☐ Addition
NAME					3.2 NAME								
STREET ADDRESS CITY-ST-ZIP					3.3. STRE								
TITLE				DELETE	34 CITY -		- /IP					Change	☐ Addition
NAME					4.2 NAME						L	onange	☐ Madeent
STREET ADDRESS	İ				4.3 STREE		ADDRESS						
CITY-ST-ZIP					4.4 CITY-								
TITLE				DELETE	5. 1 TiTLE		 -					Change	☐ Addition
NAME					5.2 NAME	E.							

6.4 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)(k). Florida Statutes. I further certify that the information indicated of 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 directly of the combration 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 2 if phage 3 or on an appropriate that I am an officer or directly file that I am an offic

5.2 NAME

6. 1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5 4 CITY - ST - ZIP

SIGNATURE() DETEK MON'N-Vegre 4-12-96
Detek Mon'n-Vegre 4-12-96
Detek Mon'n-Vegre 4-12-96

DELETE

☐ Change

□ Addition