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PROFIT CORPORATION ANNUAL REPORT 1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

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Mar 10 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J13199

(1)

KEY LAR	GO PROPERTIES, INC.	Mailing /	Address		.							
HOLIDAY INN D		P O BOX										
99701 OVERSEAS	S HIGHWAY	HARRODS	CREEK KY 400	27-0301								
key largo fl Us	33037	US					3.	Date Incorporated or Qualified	3a. Da	ate of Las	st Report	\neg
00							.1	05/07/1986	04/	18/199	6	
2. Principal Pla	ace of Business	2a. Mailir	ng Address			·-···		FEI Number	. I X., Z.J.		Applied Fo	or
1		26	Suite, Apt. #, etc.				59-2674390			Not Applic		
— Suite, Apt. # □□	# etc.						5.	Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State		27 City /	3 State				 	Election Campaign Financing			00 May Be	
3		28	- 0,0.0					Trust Fund Contribution			led to Fees	
Zφ	ιρ Country		Zip				8.	This corporation has liability for	intangible	tax unde	er s. 199.03	32,
4	25		29 30				Florida Statutes Yes No					
	9. Name and Address of Currer	nt Registered	Agent		-		10.	Name and Address of New Re	gistered	Agent		
	LLS, JOYCE ANN				81	Name						
	DAY IN DOCKSTORE				82	Street Addr	dress (P	O. Box Number is Not Accepta	ble)			
	1 OVERSEAS HIGHWAY				83							
KEY	LARGO FL 33037											
					84	City			FL	85 2	Zip Code	
agent Far SIGNATURE	egistered agent or both, in the State or fam har with, and accept the oblig Signature typics or printed number of registered age	ations of, Sect	ion 607.0505, FI	orida Sta	stutes	6. ant signature requi	uired when	reinslaing)	DATE			
12.	OFFICERS AN	D DIRECTORS		13.				ADDITIONS/CHANGES TO OFFI	CERS AND			
THILE	PD		DELETE		TITLE					Chan	nge [_] Ad	ווטוווטנו
NAME	HENDRICKS, JAMES W. 49 SPADEFISH LN.				NAME	ADDRESS						
STREET ADORESS City - St - ZIP	KEY LARGO FL					SY-ZIP						
TITLE	DV		DELETE		ITLE.	/ <u></u>				Chan	ige Ac	ddition
NAME	HENDRICKS, JAMES W., JR.				22 NAME							
STREET ADDRESS	99701 OVERSEAS HWY			23	STREET	ADDRESS		•				
CITY - S1 - ZIP	KEY LARGO FL			2.4	CITY-	ST-ZIP						
TITLE			☐ DELETE		TITLE	İ			, i	Chan	ige L. Ac	ddition
NAME					NAME							
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NAME				1	NAME						-	
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NAME					NAME							
STREET ADORESS	•					ADDRESS						
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HILE MARKE			DECEM		NAME						. <u> </u>	
NAME STREET ADDRESS						T ADDRESS						
one of his				1 64	CITY - !	ST-74P						
14. I do heret	by certify that the information supplie	ed with this filin	ng does not qua	lity for th	q qxe	emption state	ed in Se	ction 119.07(3)(i), Florida Statut	es. I furthe	er certify	that the	the thei
informatio Lam an of appears i	by certify that the information supplies on indicated on this armuful report or flicer or director of the comporation on the Black 12 or Block 13 if thanged, o	supplemental or the receiver or on an attach	annual report is or trusted empo ment with an ac	wered to deress.	exec	urate and tha cute this repo	iatiny 61 Oortasie 7	gnature shall riave the same leg equired by Chapter 607, Florida	Statutes;	and that	my name	ii, itidi