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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J77148

(1)

LOWER KEYS ROCK & FILL, INC.

FILED
Apr 16 1997 8:00am
Secretary of State



Principal Place	of Business	Mailing Address	Mailing Address				E TREATING ONLY HOURI AND MAIN AND AND AND DIRECT ORDER DIRECT AND				
26351 OLD STA RAMROD KEY F US		RAMROD KEY FL 33042-9	26351 OLD STATE RD 4A RAMROD KEY FL 33042-5337 US								
Ų3 		03					3. Date Incorporated or Qualified 06/08/1987		e of Last F 2/1996	Report	
2. Principal Pla	ace of Business	2a, Mailing Address			-	1.12	4. FEI Number		A	oplied For	
21	······································	26					59-2822731			ot Applicable	
Suile, Apt. # 22	<b>∜, €l</b> ¢.	Suite, Apt #, etc.					5. Certificate of Status Desired			Additional equired	
City & State		City & State	City & State				6. Election Campaign Financing	,	\$5.00	May Be	
23		28					Trust Fund Contribution			to Fees	
Zip	Country	Zip	<del></del>			B. This corporation has liability for				3. 199.032,	
24	25	29					Florida Statutes Yes No  10, Name and Address of New Registered Agent				
VDA	9. Name and Address of Curre	ant Hegistereo Agent		81	Na	me	10. Name and Address of New Ne	Istered A	<b>Ge</b> ur		
	JSE, RUDY G				146						
	MARKER 26 1/2, US HWY 1 ROD KEY FL 33042			82	Str	eet Addre	ss (P.O. Box Number is Not Acceptab	e)			
				83							
				84	Cit	у		FL	<b>85</b> 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.											
SIGNATURE _		(1)	TE D. CA					DATE	<del></del>		
12.	Signature itypion or printed name of registered at OFFICERS AT	Sentand life (Especasia (NO NO DIRECTORS	13.	a Age	ant sign	vature required	when reinstating)  ADDITIONS/CHANGES TO OFFIC		DIRECTOR	25 IN 12	
1616	<b>P</b>	DELETE	1.1 T	TLE.		<u> </u>	ADDITIONS OF TAXABLE TO STITLE		Change	Addition	
NAMI	KRAUSE, RUDY G.	<del>_</del>	1.2 N			1		-		.—	
STREET ADORESS	OLD STATE RD.				ADDR	ESS					
CITY - ST- ZIF	RAMROD KEY FL				ST-ZIP						
TITLE		DELETE					**************************************		Change	Addition	
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CITY S1-Z62			2.4 013			.					
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CITY-ST 74	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		440	17-5	ST-ZIP						
HILE		DELETE	DELETÉ 51 TITLE					Ï	Change	Addition	
NAME			5.2 N	AME							
STREET ADDRESS			5.3 S	TREET	roda 1	ESS					
CHY+\$1+7#		· · · · · · · · · · · · · · · · · · ·	5.4 C	ITY-S	T-ZIP						
TITLE		DELETE	6.1 T	TLE				Į	Change	Addition Addition	
NAME			6.2 N	AME							
STREET ADDRESS			6.3 S	TREET	ADDR	ESS				:	
CHY-ST-7IP					5) - ZIP		in Contion 119 07/3Vi). Florida Statute				

4. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, thon an attachment with an address.

SIGNATURE

NATURE AND TIPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTO

4 10 17 (305) 872-2100 Daying Prove #