

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 11, 2002 8:00 am
Secretary of State

02-11-2002 90224 044 ***150.00

DOCUMENT # K07549

1. Entity Name

KEY LARGO DEVELOPMENT CORPORATION

Principal Place of Business

**169 PEARL AVE
 TAVERNIER FL 33070**

Mailing Address

**169 PEARL AVE
 TAVERNIER FL 33070**

2. Principal Place of Business

BX 1039

Suite, Apt. #, etc.

3. Mailing Address

BX 1039

Suite, Apt. #, etc.

City & State

TAVERNIER FL

Zip

33070-1039

Country

City & State

TAVERNIER, FL.

Zip

33070-1039

Country

4. FEI Number

65-0020731

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

MURPHY, ROY D.

**169 PEARL AVE
 TAVERNIER FL 33070**

7. Name and Address of New Registered Agent

Name

MICHAEL JOSA

Street Address (P.O. Box Number is Not Acceptable)

126 INDIAN MOUND TRAIL

City

TAVERNIER

FL

Zip Code

33070

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE **Michael J. Osa V.P.**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1/14/02

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **PTD** ☐ Delete
 NAME **MURPHY, ROY D**
 STREET ADDRESS **93911 U.S. HWY. 1**
 CITY-ST-ZIP **TAVERNIER FL 33070**

TITLE **V** ☐ Delete
 NAME **OSA, MIKE**
 STREET ADDRESS **93911 U.S. HWY. 1**
 CITY-ST-ZIP **TAVERNIER FL 33070**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **OSA, MICHAEL** ☒ Change ☐ Addition
 NAME **BX 1039**
 STREET ADDRESS **TAVERNIER, FL 33070-1039**
 CITY-ST-ZIP **PRESIDENT 2/11/02**

TITLE **V** ☒ Change ☐ Addition
 NAME **MURPHY, ROY D**
 STREET ADDRESS **93911 U.S. HWY. 1**
 CITY-ST-ZIP **TAVERNIER, FL. 33070**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

ROY D. MURPHY
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-04-02

Date

Daytime Phone #

305-852-4750

1184579 AV

CR2E034 (9/01)