

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **K15341 (6)**

1. Corporation Name
KEHOE HOMES OF MARINA COVE, INC.

Principal Place of Business Mailing Address
120 JUNGLE ROAD 120 JUNGLE ROAD
PALM BEACH FL 33480 PALM BEACH FL 33480
US US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 02/10/1988 3a. Date of Last Report 08/23/1994

4. FEI Number 52-1560242 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MCMORROW, THOMAS
% KENT, HAYDEN, FACCILOLO & MCMORROW
700 SE BANK BLDG, 1200 GULF LIFE DRIVE
JACKSONVILLE FL 32207

B1 Name **Palmetto Charter Services, Inc.** (NOTE: Palmetto
B2 Street Address (P.O. Box Number is Not Acceptable) **Charter Services, Inc. is new registered agent**
B3 per Statement of Change filed 12/23/94. Copy attached.)
B4 City **Daytona Beach** FL B5 Zip Code **32114**

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 607.0508, Florida Statutes.

SIGNATURE *[Signature]*
Signature, print or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE *3/1*

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE NAME STREET ADDRESS CITY-ST-ZIP
D ANDERSON, THOMAS 31 ROEBLING ROAD BERNARDSVILLE NJ
D COLEMAN, Denis P. 120 JUNGLE ROAD PALM BEACH FL

1.1 TITLE **President, Treasurer & Director** Change Addition
1.2 NAME **Thomas E. Murray, Jr.**
1.3 STREET ADDRESS **Winter Beach 20-201**
1.4 CITY-ST-ZIP **9057 E. Mississippi Avenue Denver, CO 80231**
2.1 TITLE **Secretary** Change Addition
2.2 NAME **Fred Lewers**
2.3 STREET ADDRESS **Florida Park Drive, North**
2.4 CITY-ST-ZIP **Sunrise Plaza - Suite 107 Palm Coast, FL 32137**
3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
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 110.07(3)(b), Florida Statutes. I further certify that the information indicated in 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 registered or limited employee to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 and changed, or is an attached agent with an address.

SIGNATURE: *[Signature]*
Name, print or printed name of officer or director
Denis P. Coleman, Sr., Director

Date **3/6/95** (407) 655-5001
Daytime Phone #