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FILED
May 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT **1998**



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

DOCUMENT # K57395 (1)
 1. Corporation Name
GOLDEN KEY INVESTMENTS, INC.



Principal Place of Business Mailing Address

C/O J GEOFFREY PFLUGNER
2033 MAIN ST STE 101
SARASOTA FL 34237
US

C/O J GEOFFREY PFLUGNER
2033 MAIN ST STE 101
SARASOTA FL 34237
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

3. Date Incorporated or Qualified
01/11/1989

4. FEI Number **65-0094631** 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 owes or has paid the current year intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

PFLUGNER, J. GEOFFREY ESQ.
% ICARD, MERRILL, CULLIS, TIMM, ET-AL
STE 101
SARASOTA FL 34237

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE DELETE

NAME **DP ARNSBY, DAVID**

STREET ADDRESS **5824 TIDEWOOD AVENUE**

CITY-ST-ZIP **SARASOTA FL**

TITLE DELETE

NAME **DST ARNSBY, ANN**

STREET ADDRESS **5824 TIDEWOOD AVENUE**

CITY-ST-ZIP **SARASOTA FL**

TITLE DELETE

NAME **DV ARNSBY, NICHOLAS B**

STREET ADDRESS **5824 TIDEWOOD AVE**

CITY-ST-ZIP **SARASOTA FL**

TITLE DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE Change Addition

3.2 NAME **DV Arnsby, Nicholas B**

3.3 STREET ADDRESS **1681 South Kirkman Rd., #242**

3.4 CITY-ST-ZIP **Orlando, FL 32811**

4.1 TITLE Change Addition

4.2 NAME **DV Arnsby, James B.**

4.3 STREET ADDRESS **2814 River Pines Way**

4.4 CITY-ST-ZIP **Sarasota, FL 34231**

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 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, or on an attachment with an address.

SIGNATURE:  4/7/98 (911) 216-3370

CR2E034 (10/97)