FILI	E NOW: FILING FE	E AFTER MAY	1 IS \$22	5.00			
PROFIT FLORIDA DEPARTMI CORPORATION Sandra B. M			EPARTMENT C				
ANNUAL REPORT Secretary of Stat							
1996 Division of corporations							
DOCUMENT # L34830 (4)							
	TURY 21 HEART OF THE	KEYS, INC.					
Principal Place of Business Mailing Address							U a landi afta rki afta r
12690 OVERSEAS HWY. 12690 OVERSEAS HWY. MARATHON FL 33050 MARATHON FL 33050							
					3. Date Incorporated or Qualified 12/08/1989	3a. Date of Last Rep 06/14/19	
2. Principal Pla	ace of Business	2a. Mailing Address 26			4. FEI Number 65-0164590	A	pplied For
Suite, Apt. ;	#, etc.	Suite, Apt. #, etc	uite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75	ot Applicable Additional
22 27 27 City & State City & State				 	6. Election Campaign Financing		equired May Be
23 Zip	28 Country Zip		Coun	tnz	Trust Fund Contribution	L Added	to Fees
24	25	29	30		B. This corporation has liability for in Florida Statutes Corporation Yes	<u>No</u>	99.032,
n	9. Name and Address of Curr	rent Registered Agent		31 Name	10, Name and Address of New R	egistered Agent	·····
BAYARD, MAX M. JR. 82 Street Addres					ess (P.O. Box Number is Not Acceptabl	e)	
12690 OVERSEAS HWY MARATHON FL 33050				33			
				14 City		er Zin	Code
11. Pursuant t	to the provisions of Sections 607.05	502 and 607 1508 Florida St	stutes the show	- pamed corpor	ation submits this statement for the purp		vieters of a ffire
or registeri	ed agent, or both, in the State of Fi th, and accept the obligations of, Se	iorioa. Such chande was auth	orized by the co	rporation's boar	d of directors. I hereby accept the appo	intment as registered a	gent. Lam
SIGNATURE _	Signature, typed or printed name of registered ag	gent and title if applicable.	(NOTE: Registered A	gont signature required	d when rainslating)	DATE	
12. Mitt	OFFICERS /		13.	·····	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTOR	S IN 12
NAME	BAYARD, MAX M., JR.		1. 1 TITI 1.2 NAM	1		Change	Addition
STREET ADURESS	12690 OVERSEAS HWY			EET ADDRESS			SIN 12 Mddilion (15,02) 5E034 (15,02)
CITY-ST-ZIP TITLE	MARATHON FL	DELETE	1.4 CITY 2. 1 7ITI	- ST-ZIP E		Change	Addition
NAME			2.2 NAN	E			
STREET ADDRESS CHTY+ST+Z/P				ET ADORESS			
TILE		DELETE	3 1 TITL			Change	Addition
NAME STREET ADORESS			32 NAM	eet address			
CITY - S1 - ZIP				-ST-ZIP			
TATLE		DELETE	4. 1 TiTL			🗌 Change	Addition
NAME STREET ADDRESS			4.2 NAN 4.3 STRI	ET ADDRESS			
CHTY-ST-ZIP				-ST-ZIP			
THLE NAME		DELETE	5. 1 TITL 5.2 NAM			Change	Addition
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	· · · · ·	- ST- ZIP			
NAME			6. 1 TITE 6.2 NAM			Change	Addition
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP 14. I do hereby	y certify that the information supplie	d with this filing is voluntarily	urnished and dr	-ST-ZIP bes not qualify fo	or the exemption stated in Section 119.0	7(3)(k), Florida Statutes	i. I further
oath; that I	the information indicated on this ar	nual report or supplemental a poration or the receiver or tru	annual report is istee empowere	true and accurat	te and that my signature shall have the s s report as required by Chapter 607, Flo	amo local offoct on if m	
	n.	h 1 5			11-25-01	200742 2	2277
SIGNAT	URE:	OR PRINTED NAME OF SUCHING OF	FIGER OF DIRECTO	R	4-25-96 Date	305-743-3 Daytime Phone #	<u>,)(/</u>