

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

FILED
Apr 21 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 # **L45133** (0)

1. Corporation Name

TROPICAL PROPERTIES OF THE KEYS, INC.

Principal Place of Business

**2800 OVERSEAS HWY
MARATHON FL 33050**

Mailing Address

**2800 OVERSEAS HWY
MARATHON FL 33050**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/25/1990

4. FEI Number

65-0301818

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

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

**DEVANE, WILLIAM N
5701 OVERSEAS HIGHWAY
SUITE 17
MARATHON FL 33050**

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

OFFICERS AND DIRECTORS

TITLE	PVD	<input type="checkbox"/> DELETE
NAME	HOOVER, KENNETH R.	
STREET ADDRESS	2800 OVERSEAS HWY	
CITY-ST-ZIP	MARATHON FL 33050	
TITLE	STD	<input type="checkbox"/> DELETE
NAME	ROGER, EDWARDS L	
STREET ADDRESS	2800 OVERSEAS HWY	
CITY-ST-ZIP	MARATHON FL 33050	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BENNINGHOVE, RICHARD	
STREET ADDRESS	2800 OVERSEAS HWY	
CITY-ST-ZIP	MARATHON FL 33050	
TITLE	XXXXXXXXXX	<input type="checkbox"/> DELETE
NAME	XXXXXXXXXX	
STREET ADDRESS	XXXXXXXXXX	
CITY-ST-ZIP	XXXXXXXXXX	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.1 TITLE	Treasurer / Director	
1.2 NAME	MORTON, IAN	
1.3 STREET ADDRESS	2600 Overseas Highway	
1.4 CITY-ST-ZIP	MARATHON, FL 33050	
2.1 TITLE	Edwards, Roger	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	2600 Overseas Hwy	
2.3 STREET ADDRESS	MARATHON FL 33050	
2.4 CITY-ST-ZIP		
3.1 TITLE	Secretary / Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Benninghove, Richard	
3.3 STREET ADDRESS	2600 Overseas Hwy	
3.4 CITY-ST-ZIP	MARATHON FL 33050	
4.1 TITLE	PRESIDENT / Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Hoover, Kenneth R	
4.3 STREET ADDRESS	2600 Overseas Hwy	
4.4 CITY-ST-ZIP	MARATHON FL 33050	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: *Richard Benninghove* 2/5/98 305-743-9071

CR2E034 (10/97)