

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L99536

1. Entity Name

CONCH KEY COTTAGES OF THE FLA. KEYS, INC. ✓

**FILED**  
**Jul 28, 2000 8:00 am**  
**Secretary of State**

07-28-2000 90144 019 \*\*\*550.00

Principal Place of Business

62250 OVERSEAS HWY  
MARATHON FL 33050  
US

Mailing Address

62250 OVERSEAS HWY  
MARATHON FL 33050  
US

2. Principal Place of Business

62250 Overseas Hwy.  
Suite, Apt. #, etc.

3. Mailing Address

SAME  
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

MARATHON FL.

City & State

SAME

4. FEI Number

65-0219106

Applied For

Not Applicable

Zip

33050

Country

U.S.

Zip

SAME

Country

SAME

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

MILLER, ROBERT K.  
2975 OVERSEAS HWY  
MARATHON FL 33050

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**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 ☐ Delete  
NAME D  
STREET ADDRESS WILSON, RONALD S.  
CITY-ST-ZIP 62250 OVERSEAS HWY  
MARATHON FL 33050

TITLE ☐ Delete  
NAME D  
STREET ADDRESS BYRNES, WAYNE  
CITY-ST-ZIP 62250 OVERSEAS HWY  
MARATHON FL 33050

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 ☐ 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

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:

Wayne Byrnes  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/00

Date

305-289-1377

Daytime Phone #