FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1, Corporation Name

PYRAMID BUILDING FUND, INC.

FILED Feb 19 1997 8:00am Secretary of State

Principal Place of Business Mailing Address								(18) &(6)) (8)(1) (HOLL BIRM BIR	H 01011 (VA)	
C/O KENNETH STUBBS C/O KENNETH STUBBS											
BOX 906 BOX 906						İ					
LONG KEY FL 33001 LONG KEY FL 33001-0906							3. Date incorporated or Qualified 3a. Date of Last Report 03/21/1988 04/25/1996				
2. Principal Pi	lace of Business	2a. Mailir	2a. Mailing Address				4. FEI Number	<u> </u>	AD	plied For	
21		26					65-0014216			Applicable	
Suite, Apt.	#, etc.	Suite,	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 A	Additional	
22		27					5. Certificate of diame pessed		Fee Re	quired	
City & State	9	— ·	City & State				6. Election Campaign Financing	_	\$5.00		
23	0		28				Trust Fund Contribution L Added to Fees				
Zip	Country	Zip		Cour	ıtry		This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
24	25 29 30 9. Name and Address of Current Registered Agent			30	Fiorida Statutes Lives Livo 10. Name and Address of New Registered Agent						
	<u> </u>				81 N	ame	70- 114174 474 774	<u> </u>			
CTUDDE VENIETU W											
STUBBS, KENNETH W. 65821 OVERSEAS HIGHWAY					82 S	treet Addre	ss (P.O. Box Number is Not Acceptal	ole)			
P. O. BOX 906 MM 66				<u> </u>	83						
	EY FL 33001			-				····	1		
				ľ	84 C	ity		FL	85 Zip C	ode	
11. Pursuant	to the provisions of Sections 617,050	2 and 617.150	8, Florida Statut	es, the ab	ove-na	med corpo	ration submits this statement for the parties of directors. I hereby acce	ourpose of cl	nanging its	s registered	
office or re agent. La	egistered agent, or both, in the State m familiar with, and accept the oblig	of Florida, Suc ations of, Secti	ch change was i on 617.0503, Fk	autnorized orida Statu	i by the Ites	e corporatio	on's board of directors. I hereby acce	pt the appoir	iment as	registered	
SIGNATURE	Kenneth W STUE	385	N.	mme	tl.	WST	illo S/T	/- /0 ·	-97	Ì	
Signature typed or printed name of registered agent and title if applicable. (NOTE: Register						gnature required	d when reinstating)				
12.	OFFICERS AN	DIRECTORS	DELETE	13.			ADDITIONS/CHANGES TO OFFIC		Change	S IN 12 Addition	
TITLE	LEAVITT, SAMUEL S		LJ becele	1.1 TIT				L.,	1 comple	L. ACCITION	
NAME STREET ADDRESS	755 W OCEAN DRIVE			1.2 NA	-	nran l					
	KEY COLONY BEACH FL			1	EET ADD	1				j	
CITY-ST-ZIP TITLE	D D		☐ D€LETE	2.1 717	Y-ST-ZI LF				Change	Addition	
NAME	HALL, JULIAN H.			2.2 NA		1					
STREET ADDRESS	RT 5 BOX 84				EET ADD	RESS					
CITY-ST-ZIP	BIG PINE KEY FL	The Constant of the Constant			Y-51-2		en e				
TITLE	TDS		DELETE	3.1 TIT			CT PRE Vannet/	141	Change	Addition	
NAME	Stubbs, Kenneth W.			3.2 NAJ	ME		COSUL COSULC	e Hwy			
STREET ADDRESS	65821 OVERSEAS HWY			3.3 STF	REET ADD	RESS	STUBBS Kenneth 15821 oversee Long Key Fl 3]	
CITY-ST-ZIP	LONG KEY FL			3.4. CIT	Y-ST-Z	IP Z	-ong ker +1 3.	3001			
TITLE	D		DELETE	4.1 TIT	LE			L	Change	☐ Addition	
NAME	VOIGHT, PAUL			4. 2 NA	ME						
STREET ADDRESS	481 10TH STREET			4.3 STF	EET ADD	RESS				ļ	
CITY-ST-ZIP	KEY COLONY BEACH FL		1 05		Y - ST - ZH	P			T 2.		
TITLE	D		DELETE	5.1 TITI		}		L.	Change	Addition	
NAME	WILKINSON, WILLIAN S.			5.2 NA)		}				}	
STREET ADDRESS	4680 OVERSEAS HWY				REET ADD						
CITY-ST-ZIP	MARATHON FL		DELETE		Y-ST-ZII				T Cha	TEN AND THE	
TITLE			I'' DUTE IE	6.1 TITI		JP 5	Tone Linu D	L	Change	Addition	
NAME STREET ADDRESS				6.2 NA)		NO 5	48 294 St Ocean ARATHUY Fl. 33050	1		į	
					REET ADD	MESS M	ARAINOY FI.			İ	
CITY - ST - ZIP				6.4 CIT	Y-ST-ZII	P.	3303U				

14. If do 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 eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.