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**

N94000004265 (4) DOCUMENT #

KEY BISCAYNE LIGHTHOUSE RUN AND WALK, INC.															
Principal Plac	e of Business		Mailin	Mailing Address					1	A COMPANION BANK AND	I DI III DI BITATA DA	ANN GIBIR (1		IBI BIII IDAI	
SOO N MASHTA DR SOO N MASHTA DR KEY BISCAYNE FL X3149-17:					9-1719	9									
							3.	Date Incorporated or Qualified 08/30/1994	3a. D	ate of La 11/04/	ist Re /199	port 6			
2. Principal P	lace of Busine	ess	2a. Mailing Address					4.	FEI Number			Apr	olied For		
21		26					<u> </u>	65-0516611				Applicable			
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5.	Certificate of Status Desired				dditional		
City & Stat		City & State					 _	Florities Committee Fit and in				quired			
23			28						6.	Election Campaign Financing Trust Fund Contribution	П			May Be Fees	
	Zip Country						Country			This corporation has liability for	intendible				
24	26		29	29		•			"	• • •	Yes [TOI D.	199.002,	
	9. Name and Address of Curr									Name and Address of New Re	gistered	Agent			
						81	N	ame							
BREWST	TER, JAMES					82 Street Addres			P.O. Box Number is Not Acceptate	vie)					
	RTH MASHT					Siros, Adares			TO BOX HEMBOT TO HOL FLOOD PLAT						
KEY BISCAYNE FL 33149															
						84	c	ity				85	Zip C	ode	
							1	•			<u> </u>	.			
11. Pursuant	to the provision	ons of Sections 617.05	502 and 617.1	1508, Florida Stat	utes, the	above	9-na , the	med corpo	ratio	n submits this statement for the popular of directors. I hereby accel	ourpose o	f changi	ng its	registered	
agent. I a	ım familiar witi	n, and accept the obli	gations of, Se	ection 617.0503, f	Florida S	tatules), ,	corporatio) 3 L	podra of alloctors. Thereby acce	or the other	Ollianon	(as i	ogistorou	
SIGNATURE															
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Regis							nt sig	gnature requires		reinstaling) ADDITIONS/CHANGES TO OFFIC	DATE	2 DIDEO	TODE	111.40	
12.	D	OFFICERS A	ND DIRECTO	DELETE	1;	3. 1 TITLE				ADDITIONS/CHANGES TO OFFIC	EHS AIVL	Char		Addition	
NAME	BREWSTER, JAMES H IV		Oferic			2 NAME						L) Vilai	igo	☐ AQUIDA	
	STREET ADDRESS 500 N MASHTA DR						1.3 STREET ADDRESS								
	WEW BLOCK HAVE EL AND 16						1.4 CITY-ST-ZIP								
CITY-ST-ZIP	D DISC	MINE FE 00148		DELETE		TITLE	1-211					☐ Char	100	Addition	
NAME	STONE, EDWARD H				- 1	2 NAME				•			.90		
STREET ADDRESS						2.3 STREET ADDRESS		RESS							
CITY-ST-ZIP							2. 4 CITY-ST-ZIP								
TITLE	D	7,1,110 1 5 99 179		DELETE		3.1 TITLE						Char	ige	Addition	
NAME	OWENS,	ANN S			3.2	2 NAME									
STREET ADDRESS		AN LN DR			3.3	3.3 STREET ADDRESS									
CITY-ST-ZIP		AYNE FL 33149		3.4.0			ST-ZI	P							
TITLE	D			DELETE			4.1 TITLE			1,,,,,,		Char	ige	Addition	
NAME	BROOKS,	ROBERT			4.	2 NAME									
STREET ADDRESS	ADDRESS 95 W MCINTYRE ST			42			4.3 STREET ADDRESS								
CITY-ST-ZIP	-ST-ZIP KEY BISCAYNE FL 33149			4.4 D			T-ZIF	·							
TITLE				DELETE	5.1	TITLE						Char	190	Addition	
NAME					5.4	NAME									
STREET ADDRESS					5.3	STREET	ADDI	RESS							
CITY-ST-ZIP						CITY-S	Y-21	-							
TITLE				DELETE		TITLE						Char	ıge	☐ Addition	
NAME						NAME									
STREET ADDRESS					6.3 STREET A										
CITY-ST-ZIP					6.4	CITY-SI	T-ZIF	<u> </u>							

14. I 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 oath; that I am an officer or director of the corporation or the receiver or trustee phrowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed of the appears in Block 12 or Block 13 if changed of the appears in Block 12 or Block 13 if changed of the appears in Block 13 if changed of the appears in Block 12 or Block 13 if changed of the appears in Block 13 if changed of the appears in Block 12 or Block 13 if changed of the appears in Block 13 if changed of the appears in Block 13 if changed of the appears in Bl

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Jun 09 1997 8:00am

Secretary of State