

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90265 017 ****61.25

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1. Corporation Name

FLORIDA KEYS DISCOVERY, INC.

Principal Place of Business

2331 PENSACOLA ROAD
BIG PINE KEY FL 33043

Mailing Address

POST OFFICE BOX 430137
BIG PINE KEY FL 33043-0137

451604 - 90265 - 17 4



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

Country

3. Date Incorporated or Qualified

05/30/1995

4. FEI Number

65-0590409

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

9. Name and Address of Current Registered Agent

ERSKINE, LARRY A
31211 AVENUE A
SUITE 1
BIG PINE KEY FL 33043

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE TO ☒ DELETE
NAME BENSON, GEORGE A
STREET ADDRESS POST OFFICE BOX 430377 N/A
CITY-ST-ZIP BIG PINE KEY FL 33043-0377

TITLE D ☐ DELETE
NAME BETTIS, MARGO
STREET ADDRESS POB 522857 N/A
CITY-ST-ZIP MARATHON SHORES FL 33052-2857

TITLE SD ☐ DELETE
NAME D'ANTONIO, SUSANN
STREET ADDRESS 30262 POINCIANA RD
CITY-ST-ZIP BIG PINE KEY FL 33043

TITLE D ☒ DELETE
NAME NEWMAN, JOYCE CLARK
STREET ADDRESS POST OFFICE BOX 430137 N/A
CITY-ST-ZIP BIG PINE KEY FL 33043-0137

TITLE VD ☐ DELETE
NAME CLUPPER, JAMES M
STREET ADDRESS POB 1129 N/A
CITY-ST-ZIP ISLAMORADA FL 33036-1129

TITLE PD ☐ DELETE
NAME KLIPPEN, LEONARD E
STREET ADDRESS 29122 GUAVA LN
CITY-ST-ZIP BIG PINE KEY FL 33043-6060

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE T/D ☐ Change ☒ Addition
1.2 NAME ELDRIDGE, BARBARA B.
1.3 STREET ADDRESS 7548 GULFSTREAM BLVD.
1.4 CITY-ST-ZIP MARATHON, FL 33050

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE D ☒ Addition
4.2 NAME BURRELL, WINSTON
4.3 STREET ADDRESS 7 ARBUTUS
4.4 CITY-ST-ZIP KEY WEST, FL 33040

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *B. Benson*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(305) 289-1685

CR2E037 (11/98)