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Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Northam, Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N96000003124 (2)

1. Corporation Name

HEART OF THE KEYS TOURISM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

12222 OVERSEAS HIGHWAY  
MARATHON FL 33050

12222 OVERSEAS HIGHWAY  
MARATHON FL 33050-3529



3. Date Incorporated or Qualified

06/10/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WRIGHT, THOMAS D ESQ.  
FIRST PROFESSIONAL CENTRE, SUITE 17  
5701 OVERSEAS HIGHWAY  
MARATHON FL 33050

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME RODRIGUEZ, MANDY  
STREET ADDRESS 450 52ND STREET  
CITY-ST-ZIP MARATHON FL 33050

TITLE VD ☐ DELETE

NAME WRIGHT, THOMAS D  
STREET ADDRESS 5701 OVERSEAS HIGHWAY, SUITE 17  
CITY-ST-ZIP MARATHON FL 33050

TITLE D ☐ DELETE

NAME KITCHENER, AMELIA K  
STREET ADDRESS 1583 52ND STREET, GULF  
CITY-ST-ZIP MARATHON FL 33050

TITLE SD ☐ DELETE

NAME DORSMAN, JUDY  
STREET ADDRESS 12685 OVERSEAS HIGHWAY  
CITY-ST-ZIP MARATHON FL 33050

TITLE TD ☐ DELETE

NAME TAVERNIER, DAVE  
STREET ADDRESS 1001 80TH STREET  
CITY-ST-ZIP MARATHON FL 33050

TITLE D ☐ DELETE

NAME SCHULER, DELLA  
STREET ADDRESS 450 52ND STREET  
CITY-ST-ZIP MARATHON FL 33050

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/96)