

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2004 8:00 am
Secretary of State

04-05-2004 90006 033 ***150.00

DOCUMENT # P01000103220

1. Entity Name
KEYS DESIGNS BY MARK, INC.



Principal Place of Business

**151 LONG KEY ROAD
KEY LARGO, FL 33037**

Mailing Address

**151 LONG KEY ROAD
KEY LARGO, FL 33037**

04040362

2. Principal Place of Business

369 Buttonwood Shores Dr.

3. Mailing Address

P.O. BOX 3147

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03312004

Chg-P

CR2E034 (10/03)



City & State

Key Largo, FL

City & State

Key Largo, FL

4. FEI Number

65-1147608

Applied For

Not Applicable

Zip

33037

Country

USA

Zip

33037

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional

Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
NAME **NEFF, MARK A**
STREET ADDRESS **151 LONG KEY ROAD**
CITY-ST-ZIP **KEY LARGO, FL 33037**

TITLE **PD** ☒ Change
NAME **MARK A NEFF**
STREET ADDRESS **369 Buttonwood Shores Dr**
CITY-ST-ZIP **KEY LARGO, FL 33037**

TITLE **VTD** ☐ Delete
NAME **PHILLIPS, ELIZABETH J**
STREET ADDRESS **151 LONG KEY ROAD**
CITY-ST-ZIP **KEY LARGO, FL 33037** **MARRIED 9-27-03**

TITLE ☒ Change ☐ Addition
NAME **ELIZABETH J. NEFF**
STREET ADDRESS **369 Buttonwood Shores Dr.**
CITY-ST-ZIP **Key Largo, FL 33037**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Elizabeth J. Neff **3-31-04**

Date

Daytime Phone #

305 451-5029

Attachments - P01000103220

(STATE FILE NUMBER)

54025962

**STATE OF FLORIDA
MARRIAGE RECORD
TYPE IN UPPER CASE
USE BLACK INK**

This license not valid unless seal of Clerk,
Circuit or County Court, appears thereon.

**MONROE COUNTY
OFFICIAL RECORDS**

**FILE #1399723
BK#1937 PG#344**

**RCD Oct 02 2003 12:21PM
DANNY L KOLHAGE, CLERK**

P3352
(APPLICATION NUMBER)

APPLICATION TO MARRY			
1. GROOM'S NAME (First, Middle, Last) MARK ALAN NEFF		2. DATE OF BIRTH (Month, Day, Year) August 13, 1954	
3a. RESIDENCE - CITY, TOWN, OR LOCATION KEY LARGO	3b. COUNTY MONROE	3c. STATE FLORIDA	4. BIRTHPLACE (State or Foreign Country) MICHIGAN
5a. BRIDE'S NAME (First, Middle, Last) ELIZABETH JANE PHILLIPS		5b. MAIDEN SURNAME (if different) N/A	6. DATE OF BIRTH (Month, Day, Year) November 4, 1954
7a. RESIDENCE - CITY, TOWN, OR LOCATION KEY LARGO	7b. COUNTY MONROE	7c. STATE FLORIDA	8. BIRTHPLACE (State or Foreign Country) FLORIDA
<p>WE THE APPLICANTS NAMED IN THIS CERTIFICATE, EACH FOR HIMSELF OR HERSELF, STATE THAT THE INFORMATION PROVIDED ON THIS RECORD IS CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF, THAT NO LEGAL OBJECTION TO THE MARRIAGE NOR THE ISSUANCE OF A LICENSE TO AUTHORIZE THE SAME IS KNOWN TO US AND HEREBY APPLY FOR LICENSE TO MARRY.</p>			
9. SIGNATURE OF GROOM (Sign full name using black ink) <i>Mark Alan Neff</i>		10. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE) September 12, 2003	
11. TITLE OF OFFICIAL DEPUTY CLERK		12. SIGNATURE OF OFFICIAL (Use black ink) <i>Joyce Brubaker</i>	
13. SIGNATURE OF BRIDE (Sign full name using black ink) <i>Elizabeth Jane Phillips</i>		14. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE) September 12, 2003	
15. TITLE OF OFFICIAL DEPUTY CLERK		16. SIGNATURE OF OFFICIAL (Use black ink) <i>Joyce Brubaker</i>	
LICENSE TO MARRY			
<p>AUTHORIZATION AND LICENSE IS HEREBY GIVEN TO ANY PERSON DULY AUTHORIZED BY THE LAWS OF THE STATE OF FLORIDA TO PERFORM A MARRIAGE CEREMONY WITHIN THE STATE OF FLORIDA AND TO SOLEMNIZE THE MARRIAGE OF THE ABOVE NAMED PERSONS. THIS LICENSE MUST BE USED ON OR AFTER THE EFFECTIVE DATE AND ON OR BEFORE THE EXPIRATION DATE IN THE STATE OF FLORIDA IN ORDER TO BE RECORDED AND VALID.</p>			
17. COUNTY ISSUING LICENSE MONROE	18. DATE LICENSE ISSUED September 12, 2003	19a. DATE LICENSE EFFECTIVE September 15, 2003	19b. EXPIRATION DATE November 14, 2003
20a. SIGNATURE OF COURT CLERK OR JUDGE DANNY L KOLHAGE		20b. TITLE CLERK OF THE COURT	
CERTIFICATE OF MARRIAGE			
I HEREBY CERTIFY THAT THE ABOVE NAMED GROOM AND BRIDE WERE JOINED BY ME IN MARRIAGE IN ACCORDANCE WITH THE LAWS OF THE STATE OF FLORIDA.			
21. DATE OF MARRIAGE (Month, Day, Year) September 27, 2003		22. CITY, TOWN, OR LOCATION OF MARRIAGE Islamorada	
23a. SIGNATURE OF PERSON PERFORMING CEREMONY (Use black ink) <i>Robin E. Schlaudecker</i>		23b. ADDRESS (Of person performing ceremony) 446 Lime Dr, Key Largo, FL 33037	
23c. NAME AND TITLE OF PERSON PERFORMING CEREMONY (Use black ink) ROBIN E. SCHLAUDECKER EXPIRES: July 31, 2005 Bonded Third Notary Public Underwriters		24. SIGNATURE OF WITNESS TO CEREMONY (Use black ink) <i>W. H. H. H.</i>	
25. NAME AND TITLE OF PERSON PERFORMING CEREMONY (Use black ink) ROBIN E. SCHLAUDECKER		26. SIGNATURE OF WITNESS TO CEREMONY (Use black ink) <i>M. R. V. I. L. A. G. A. S. P. A. D.</i>	

26. SOCIAL SECURITY NUMBER

27. RACE

28. WERE YOU EVER

IF ANSWER IS YES TO ITEM 28, THEN COMPLETE ITEMS 29a, 29b, and 29c.

**STATE OF FLORIDA
COUNTY OF MONROE**

This Copy is a True Copy of the
Original on File in this Office. Witness
my hand and Official Seal.

This 16 day of October

A.D. 20 03
DANNY L KOLHAGE
Clerk of Court

By

n.c.