FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9200

P92000005481 (6)

KEEPER OF THE KEYS, INC.

FILED May 01 1998 8:00am Secretary of State



				-	8 1 1 9 1 1 8 1 1 1 1 1 1 1
Principal Place	e of Business	Mailing Address			
13101 OVERSEAS HWY 13101 OVERSEAS HWY					
MARATHON FL 33050 MARATHON FL 33050				DO NOT WRITE IN THI	S SPACE
				3. Date Incorporated or Qualified	
				11/16/1992	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 /31	of overseas liky	26 13101 OVER	15 EAS I fuy	65-0380444	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	City & State City & State		ریب	6. Election Campaign Financing	\$5.00 May Be
	PRATHEN EURIAA	28 MARATION	FLORIDA	Trust Fund Contribution	Added to Fees
24 33365	Country	Zip	Country	8. This corporation owes or has paid the o	
24 3305		29 330.50 30	กรษ	Personal Property Tax due June 30.	Yes No
	g. Name and Address of Current	Registered Agent		10. Name and Address of New Registers	d Agent
CARD, LEON 81 Name					
40400 OLEDOPAO IRIO				ess (P.O. Box Number is Not Acceptable)	-
MARATHON FL 33050					<u> </u>
			63		
			84 City		■ 85 Zip Code
			City	F	L S Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes. SIGNATURE					
Signature, typed or profero name of repeterord agent and tire if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PD	☐ DELETE	1.1 TITLE		Change Addition
NAME	CARD, ELEANORE K		1.2 NAME		
STREET ADDRESS	13100 OVERSEAS HWY		1.3 STREET ADDRESS		
CITY-ST-ZIP	MARATHON FL 33050		1.4 CHY-ST-ZIP		
TITLE	STD	☐ DELETE	21 TITLE		Change Addition
NAME	CARD, LEON		2.2 NAME		
STREET ADDRESS	13100 OVERSEAS HWY		23 STREET AODRESS		
CITY-ST-ZIP	MARATHON FL 33050		2 4 CITY-ST-ZIP	,	
TITLE		☐ DELETE	31 TITLE		Change Addition
NAME			3 2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
	partity that the information supplied with	this filing does not qualify for t		Section 119 07(3)(i) Florida Statutes 1 further	certify that the information

14. 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CIONATURE.

Jan J Car

4/12/98

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