FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE

APPROVED AND FILED

95 MAY 11 AM 8:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P92000010884 (4)

1. CITY ZOO - KEY WEST, INC.

1108A DUVAL ST
KEY WEST FL 33040

Mailing Address
1108A DUVAL ST
KEY WEST FL 33040

DO NOT WRITE IN THIS SPACE

3. Date Incorporated/Qualified: 12/10/1992
3a. Date of Last Report: 05/19/1994

4. FEI Number: 65-0392668 — 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

8. The corporation has liability for intangible tax under S. 199.042, Florida Statutes: Yes / No

2. Principal Place of Business
21 Street Address
22 Suite Apt. #
23 City
24 State 25 Zip Code

2a. Mailing Address
26 Street Address
27 Suite Apt. #
28 City & State
29 Zip 30 Country

9. Name and Address of Current Registered Agent

GRAZI, LEIF J., ESQ.
217 EAST OCEAN BLVD.
STUART FL 34994

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 607.0505 and 607.1508, Florida Statutes, the above named corporation submits the 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 hereby accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

D
CHILDS, PAMELA
147 WARREN AVE
BOSTON MA 02116

D
WALCZAK, SUZANNE
1108F DUVAL ST
KEY WEST FL 33040

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 19

Title
Name
Street Address
City, State, Zip
☐ Change ☐ Addition

14. I hereby certify that the information supplied with this report is voluntarily furnished and does not qualify for the exemptions stated in Section 119.07(3), Florida Statutes. Further, I certify that the information contained in the 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 a director or officer of the corporation or the receiver or trustee empowered to execute the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 hereof, or I am attaching hereto with an addendum.

SIGNATURE: 5/8/95 305-293-1711

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Telephone Number

0100376 CP