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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

	RPORATION UAL REPORT 1997	PORT Secretary of State		Secretary of State			
1. Corporati	R KEY ISLAND HOPPER,		(9)				
Principal Place of Business CITY MARINA CEDAR KEY FL 32625 US		Mailing Address P. O. BOX 106 CEDAR KEY FL S US	2625-0106		s same at the same ages ages ages	4 109 (1851 119 19419 1941 USA (1951) USA (1951) USA (1951) JUNE (1961 1951)	
	Place of Business	2a. Mailing Addre	PSS		3. Date Incorporated or Qualifie Q2/01/1993 4. FEI Number	05/01/1996 Applied For	
Suite, Apt	I #, etc.	26 Suite, Apt. #,	etc		59-3157850 5. Certificate of Status Desired	\$8.75 Additional	
22 City & Sta	ite.	City & State	·		Election Campaign Financing	Fee Required	
23		28			Trust Fund Contribution	Added to Fees	
Ζφ 24	Country				8. This corporation has liability for intangible tax under s. 199.032. Florida Statutes Yes 100 Yes		
	9. Name and Address of Co			T	10. Name and Address of New	Registered Agent	
	EMP, JAMES B.			81 Name			
HWY 24, SUNSET ISLE CEDAR KEY FL 32625 82 Street Address 83					Address (P.O. Box Number is Not Accep	ress (P.O. Box Number is Not Acceptable)	
							
				84 City		FL 65 Zip Code	
11. Pursuan office or agent. I SIGNATURE	t to the provisions of Sections 60 registered agent, or both, in the arm familiar will, and accept the common familiar will, and accept the common familiar will, and accept the common familiar will a familiar will be seen to the common familiar will be seen famili	7.0502 and 607.1508, Florid State of Florida Such chan obligations of, Section 607.0	a Statutes, the a ge was authorize 0505, Florida Sta		corporation submits this statement for the poration's board of directors. I hereby ac		
		ed again and title if applicable	(NOTE Register		e required when reinstating)	DAYE ELECTION IN AS	
12. TILLE	DEFICER	S AND DIRECTORS	13. ETE 1.13	TITLE	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12 Change Addition	
NAME	BIBLE, DORIS M			IAME		• -	
STREET ADDRESS	, , , , , , , , , , , , , , , , , , , ,		1.3 5	STREET ADDRESS			
COY-ST ZIP TRUE	CEDAR KEY FL 32625	. □ DE		CITY-ST-ZIP		Change Addition	
NAM		i or	ŧ ···	iitle Vame		g. — Change Cl Vanison	
STHEET ADDRESS				STREET ADDRESS			
CHY-S1 Za*				CITY-ST-ZIP			
IIILE		L_ D€	1	IITLE		Change	
NAME STREEL ADDRESS			1	VAME Street address			
CITY - ST ZIP				CITY-ST-ZIP		•	
HILE		DE		TITLE		Change Addition	
NAME			4.2	NAME			
STREET ADDRESS	i		- 1	STREET ADDRESS			
CHY-SI-ZIP THEE		DE		CITY-ST-ZIP		Change Addition	
NAME		mad 2.2	4	NAME	ţ 		
SIRPET ADDRESS	;		5.3	STREET ADDRESS	1		
Cilly - ST - ZiP		·		CITY-ST-ZIP	<u> </u>		
TIFLE		DE DE	ľ	IIITE		Change Addition	
NAME STREET ADDRESS			1	name Street address			
CITY-ST ZIP	` \			CITY-S1-ZIP	· ·		
	eby certify that the information su	unlied with this filing does r			stated in Section 119 07(3)(i) Florida Stat	tutes. I further certify that the	

To contrary certify that the mormation supplied with this ining does not quality for the exemption stated in Section 119.07(3)(f), 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.

SIGNATURE:

FILED

Apr 21 1997 8:00am