

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 04 1996 8:00am
Secretary of State

DOCUMENT # P93000038629 (0)

1. Corporation Name

KEYBOARD, INC.



Principal Place of Business

Mailing Address

1515 U.S. HWY 1
STE. 201
SEBASTIAN FL 32958
US

1515 U.S. HWY. 1
201
SEBASTIAN FL 32958
US

3. Date Incorporated or Qualified
05/27/1993

3a. Date of Last Report
02/14/1995

2. Principal Place of Business

2a. Mailing Address

21 1515 US Hwy. 1,

26 1515 US Hwy. 1

4. FEI Number

NOT APPLICABLE

Applied For
Not Applicable

22 Suite 201

27 Suite 201

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

City & State

23 Sebastian FL

City & State

28 Sebastian FL

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

Zip

24 32958

Country

25 USA

Zip

29 32958

Country

30 USA

7. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DILL, WARREN W
1515 U.S. HWY. 1
STE. 201
SEBASTIAN FL 32958

81 Name

SAME

82 Street Address (P.O. Box Number is Not Acceptable)

1515 US Hwy. 1,

83

Ste. 201

84 City

Sebastian

FL

85

32958

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 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 ☐ DELETE

NAME D
CRAWFORD, JAMES
STREET ADDRESS 36 HEATHER AVE
CITY-ST-ZIP GLASGOW, G61 3JG UNITED KING.

1.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME D
CRAWFORD, JEAN P
STREET ADDRESS 36 HEATHER AVE
CITY-ST-ZIP GLASGOW, G61 3JG UNITED KING.

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

J Crawford

James Crawford, President 2.15.96 (407) 589-1212

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CF2E034 (12/95)