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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000076918 (9)

ALPHA LOCK & KEY, INC.

Principal Place	e of Business	Mailing Ai	Maing Address 580 SUNSET BEACH DRIVE VENICE FL 34293-2648							
580 SUNSET BI VENICE FL 342										
						3. Date Incorporated or Qualified 11/01/1994 3a. Date of Last Report 04/19/1996				
2. Principal Pl	ace of Business	2a. Mailing	2a. Mailing Address				4. FEI Number		Ar	oplied For
21		26	26				<b>65-0531251</b> Not Applicable			
Suite, Apt.	#, etc.	ļ	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 / Fee Re	
City & State	9		City & State				6. Election Campaign Financing		\$5.00	May Re
23		28	28				Trust Fund Contribution Added to Fees			
Zip	Country Zip			Country			8. This corporation has liability for	intangible	tax under s	. 199.032,
24	25 29 30		30			Florida Statutes				
	9. Name and Address of Cu	rrent Registered A	\gent				10. Name and Address of New Re	gistered /	igent	
CON	LEY, GEORGE W				81	Name				
580	SUNSET BEACH DRIVE ICE FL 34293					Street A	ddress (P.O. Box Number is Not Acceptable)			
AEM	UE FL 34283				83	<del></del>		• • • • • • • • • • • • • • • • • • • •		
					84	City	<u>, , , , , , , , , , , , , , , , , , , </u>	FL	<b>85</b> Zip (	Code
SIGNATURE.	Sprature of or page name of (gastre	AND DIRECTORS		E Registere			oration's board of directors. I hereby accellention's board of directors. I hereby accellention board of directors accellention board	FEB9	?	
12.	D OFFICERS	AND DIRECTORS	DELETE	13.	ti c	<del></del>	ADDITIONS/CHANGES TO OFFIC	ACNO AND	Change	Addition
TITLE NAME	CONLEY, GEORGE W					Į			مواللاتان الــــا	
STREET ADDRESS	580 SUNSET BEACH DRIVE			1.2 NAME 1.3 STREET ADDRESS						
CITY-ST-ZIP	VENICE FL 34293			1.4 CITY-ST-ZIP						
TITLE	DELETE			2.1 TITLE				Change	Addition	
NAME				2.2 N	AME					
STREET ADORESS				2.3 S	TREET	ADDRESS				
CITY-ST- <i>2</i> IP				2.40	HY-	ST-ZIP		<u></u>		
TITLE			DELETE	3.1 7	TLE		HILLIAN TO THE TAXABLE TO THE TAXABL		Change	Addition
NAME				3.2 N	AME					
STREET ADDRESS				3.3 S	TREET	ADDRESS				
CITY-ST-ZIP						ST-ZIP		·	-	
TITLE			DELÉTE	4.1 Ti					Change	Addition
NAME				4. 2 1		ŀ				
STREET ADDRESS				1		ADDRESS				
CITY - ST - ZIP			DE ETE	_		T-ZIP			Change	Addition
TITLE			DELETE	511					First Augusta	Last Aboliton
NAME				5.2 N		ADDRESS				
STREET ADDRESS						ADDRESS				
CITY-ST-ZIP TITLE			DELETE	54C		T-ZIP			Change	Addition
NAME			bood Determ	I I	AME	1			vgv	
						ADDRESS				
STREET ADDRESS				u.3 3	INCC	ADUNESS				

14. I do 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 a contract that it is not a statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DY 10 PEB 97 941 - 497-09
Date Daytime Pro

**FILED** 

Feb 14 1997 8:00am

Secretary of State