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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Feb 04 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000013822 (8)

MARINE BANK OF THE FLORIDA KEYS

Principal Place of Business Mailing Address 11290 OVERSEAS HIGHWAY 11290 OVERSEAS HIGHWAY MARATHON FL 33050 MARATHON FL 33050 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/17/1995 2, Principal Place of Business Mailing Address 4. FEI Number Applied For 65-0414448 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be П 23 28 Trust Fund Contribution Added to Fees Zip Zip Country Country 8. This corporation owes or has paid the current year Intangible Yes □ No 30 Personal Property Tax due June 30. 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name 11290 OVERSEAS HIGHWAY 82 Street Address (P.O. Box Number is Not Acceptable) MARATHON FL 33050 83 84 City 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 printed name of registered agent and tille if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. VP C DELETE Change Addition TITLE 11 TITLE ALLISON, JOHN W CR2E034 NAME 1.2 NAME 3305 PRINCE STREET ADDRESS 1.3 STREET ADDRESS CONWAY AR 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Channe Addition TITLE 2.1 TITLE BUCKHEIM, RICHARD A P.O. BOX 430362 STREET ADDRESS 2 3 STREET AUDRESS BIG KEY PINE FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE CONLIN, JOHN W NAME 3.2 NAME 2557 SOMBRERO BLVD. STREET ADDRESS 3.3 STREET ADDRESS MARATHON FL CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change ☐ Addition 4.1 THLE TITLE DANIELS, WILLIAM S NAME 4. 2 NAME 511 AVENIDA PRIMICERIA 4.3 STREET ADDRESS STREET ADDRESS MARATHON FL CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5 1 11TLE TITLE NAME **5.2 NAME** STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 THILE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP 14. I 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 of 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 of the receiver of trustee empowered to presult his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an attachment with an address.