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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000031596

Corporation Name		
AMERICAN LOCK & KEY	NC.	
	•	
Principal Place of Business	Mailing Address	***
3261 BUCKEYE COURT	P.O. BOX 14304	
CLEARWATER FL 34021	CLEARWATER FL 34621	
,		
	•	
2. Principal Place of Business	2a. Mailing Address	
21	26	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
22	27	···
City & State	City & State	
23	28	
Zin Countr	v Zip	Country

FILED Apr 02, 1999 8:00 am Secretary of State

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Principal Place	of Business	Mailing Address					<b>88</b> ()  <b>88</b> ) <b>88</b> (	limi limmi merim ia	(\$1 <b>4 8</b> 111 1 <b>88</b> 1
3261 BUCKEYE COURT P.O. BOX 14304								•	
CLEARWATER FL 34621 CLEARWATER FL 34621							20405		
						DO NOT WRITI	E IN THIS	SPACE	
	•					3. Date Incorporated or Qualifed 04/19/1995			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		App	lied For
21		26				59-3310138			Applicable
- Suite, Apt.	#, etc.	Suite: Apt. #, etc.				5. Certificate of Status Desired		_\$8.75:A	
22		27						Fee Rec	<u> </u>
City & Stat	9	City & State				6. Election Campaign Financing		\$5.00 N Added to	
23		28	Coun	tn.	·	Trust Fund Contribution			rees
Zip	Country	Zip 29 3 3 7 4 6	30	шy		This corporation owes the curre Personal Property Tax.	nt year inta		□No
<sup>24</sup> 332	9, Name and Address of Current		30]		<del></del>	10. Name and Address of New Re	aistered /		
	9. Name and Address of Current	Registered Agent	- 1	81	Name			· <del>V</del> · · · · · · · · · · · · · · · · · · ·	
CRO	CKER, JENNIFER I		ļ.						
3261 BUCKEYE COURT		,	82	Street Addres	ess (P.O. Box Number is Not Acceptable)				
CLE	ARWATER FL 34621ー フォフ6	1	ļ.	83	<del>-</del>	· · · · · · · · · · · · · · · · · · ·			
		•						Tee1 7:- 0	
	· .			84	City		FL	85 Zip C	76/
11 Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	s, the ab	000-	named corpo	ration submits this statement for the p	urpose of	changing its r	egistered
office or r	egistered agent, or both, in the State of mediate with, and accept the obligat	st Florida. Such change was au	inorized:	של נוו	ne corporation	n's board of directors. I hereby accept	the appoir	itment as reg	istered
_	itt lattillat with, and accept the obligat	ions of, coolion contactor ( ion							1
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered A	gent s	algnature required v	when reinstating)	DATE		
12.	OFFICERS ANI		13.			ADDITIONS/CHANGES TO OFF	ICERS AN		
TITLE	D	☐ DELETE	1.1 TITL	E				` ☐ Change	☐ Addition
NAME	OTTOOTIET, OF WILLO !!		1.2 NAM	Æ					
STREET ADDRESS	4 4-7/ 1		1.3 STR	EET A	DDRESS				
CITY-ST-ZIP			1.4 CITY		ŽIP				- O delition
TITLE	☐ DELETE 2.1 TI		2.1 TITL	E				Change	☐ Addition
NAME .		and the second	2.2 NAA			• •			
STREET ADDRESS			I.		DORESS				
CITY-ST-ZIP		[] priett	2. 4 CIT		ZIP			Change	Addition
TITLE	, ·	☐ DELETE	3.1 TITL					□ change	- Addition
NAME			3.2 NAM						
STREET ADDRESS	·				DORESS				
CITY-ST-ZIP		☐ DELETE	3.4. CIT 4.1 TITL		ZIP			Change	Addition
TITLE									
NAME			4. 2 NA		ADDRESS				į
STREET ADDRESS			•			•			1
CITY-ST-ZIP		☐ DELETE	4.4 CIT 5.1 TITL		LIF		<b></b>	Change	Addition
NAME	ļ	<u> </u>	5.2 NAM					_ •	
STREET ADDRESS					ADDRESS				1
	Real or state		5.4 CIT	Y-ST-	ZIP				ļ
		☐ DELETE	6.1 TITL					Change	Addition
5.	E CARGO CON AL	_	6.2 NAM	WE	1			•	
NAME ( ) E ( ) STREET ADDRESS	The Market of the Control of the Con		6.3 STF	REETA	ADORESS				1
OTTALL MODINESS	1				]				

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 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, with all other integen powered.

SIGNATURE: JAMES REPORTED NAME OF SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER