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PROFIT CORPORATION ANNUAL REPORT

1997



FLOHDA DEPARTMENT OF STATE

FILED

May 13 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

| | YPSY OF I | KEY LARGO, INC | Mailing Addres | Mailing Address 185 BAHAMA AVENUE | | | | | | |
|--|--|--|---|---|---|---|---|-------------------------------|--|--|
| KEY LARGO FL 33037 | | key largo fl | KEY LARGO FL 33037-4351 | | | | | | | |
| US | | | US | | | | 3. Date Incorporated or Qualify | od 30 D | ate of Last F | Sorroet |
| | | | | | | | 05/15/1995 | | 01/1996 | тероп |
| 2. Principal | 2. Principal Place of Business | | 2a. Mailing Add | 2a. Mailing Address | | | 4. FEI Number | 1 99/ | | pplied For |
| 21 | <u> </u> | | 26 | · • · · · · · · · · · · · · · · · · · · | | | 65-0585552 | | N | ot Applicable |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | П | \$8.75 Additional | | |
| 22 City & St | 210 | | [27] | <u> </u> | | | | | | equired |
| 23 | ale | | City & State | 1 | | | 6. Election Campaign Financing | 9 | | May Be |
| Zip | | Country | 28] Zip | | Country | | Trust Fund Contribution 8. This corporation has liability | for intensible | | to Fees |
| 24 | | 25 | 29 | | 30 | | Florida Statutes | Yes [| | 5. 199.032, |
| | 9. Name | and Address of Curr | ent Registered Agent | | | | 10. Name and Address of New | | | |
| GI | BBS, BRADF | ORD R | | | 81 | Name | | | | |
| 16 | 5 BÁHAMA A | VENUE | | | 82 | Street Add | iress (P.O. Box Number is Not Accel | otable) | | |
| KEY LARGO FL 33037 | | | Ĺ <u>.</u> . | | | raidess (1.0 Lox intumber is not neceptable) | | | | |
| | | | | | 83 | | | | | |
| | | | | | 84 | City | | | 85 Zip | Code |
| | | | | | · I | | | | | |
| 11. Pursual office o agent. | nt to the provisi r registered ag am familiar wi | ions of Sections 607.0 ent, or both, in the Sta th, and accept the obl | 502 and 607.1508, Flor ite of Florida. Such cha gallons of, Section 607 | rida Statute inge was a 7.0505, Flo | os the above authorized by orida Statutes | named corpora The corpora | poration submits this statement for the tion's board of directors. Thereby ac | he purpose o ccept the app | f changing a pointment as | ts registered registered |
| 11. Pursuar office o agent. | am tamiliar wi | th, and accept the ob- | gations of, Section 607 | 7.0505, Flo | orida Statutes | i. | | | f changing on the following for the following fo | ts registered s registered |
| agent. | am tamiliar wi | th, and accept the ob- | gations of, Section 607 | 7.0505, Flo | orida Statutes | i. | rec when reinstabrig) | DATE | | |
| agent. I SIGNATURI | am tamiliar wi | th, and accept the ob- | igations of, Section 607 a,res and the Lapple abou ND DIRECTORS | 7.0505, Flo | orida Statutes - Begisterei Age | i. | | DATE | | RS IN 12 |
| agent. StGNATURE | Signature typed PSTD GIBBS, B | OFFICERS A | .gations of, Section 607 a,re> and the Lapple abounD DIRECTORS | 7.0505, Flo (ván | erida Statutos Registeres Age | i. | rec when reinstabrig) | DATE | D DIRECTO | RS IN 12 |
| agent. SIGNATURE | Signature typed PSTD GIBBS, B 165 BAH/ | OFFICERS A RADFORD R AMA AVENUE | .gations of, Section 607 a,re> and the Lapple abounD DIRECTORS | 7.0505, Flo (ván | Gegetern Age 13. 1.1 THE | nt signature requi | rec when reinstabrig) | DATE | D DIRECTO | RS IN 12 |
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