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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000040440 (6)

1. Corporation Name

R & W KEY LARGO CORP.



Principal Place of Business

Mailing Address

**2210 SW 57TH AVENUE
HOLLYWOOD FL 33023**

**2210 SW 57TH AVENUE
HOLLYWOOD FL 33023**

2. Principal Place of Business

2a. Mailing Address

21 11407 Knot Way

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

23 Cooper City FL

Zip

Country

Zip

Country

24 33026-1362 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WINTERS, HAROLD M
2210 SW 57TH AVENUE
HOLLYWOOD FL 33023**

81 Name **Harold M Winters**

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

83 11407 Knot Way

84 Cooper City

FL 85 33026

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 for 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

Harold Winters **Harold Winters**

(NOTE: Registered Agent Signature is required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☒ DELETE
NAME **HECKERLING, DALE A**
STREET ADDRESS **9100 SO. DADELAND BLVD. STE 1707**
CITY-ST-ZIP **MIAMI FL 33156**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
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STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **President** ☐ Change ☒ Addition
1.2 NAME **Danna Rizzo**
1.3 STREET ADDRESS **11400 Knot Way**
1.4 CITY-ST-ZIP **Cooper City FL 33026**

2.1 TITLE **Vice President** ☐ Change ☒ Addition
2.2 NAME **Diane Winters**
2.3 STREET ADDRESS **11407 Knot Way**
2.4 CITY-ST-ZIP **Cooper City FL 33026**

3.1 TITLE **Treasurer** ☐ Change ☒ Addition
3.2 NAME **Harold Winters**
3.3 STREET ADDRESS **11407 Knot Way**
3.4 CITY-ST-ZIP **Cooper City FL 33026**

4.1 TITLE **Secretary** ☐ Change ☒ Addition
4.2 NAME **Richard Rizzo**
4.3 STREET ADDRESS **11400 Knot Way**
4.4 CITY-ST-ZIP **Cooper City FL 33026**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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: *Harold Winters* **Harold Winters** **2/13/96** **9544350073**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)