

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

FILED

May 06 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra P. Mortimer Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 205000030259			
1. Corporation Name KEESEY-QUADE INTERNATIONAL			
Principal Place of Business 1053 5th Ave So Naples, Florida 34102		Mailing Address 1053 5th Ave So Naples, Florida 34102	
2. Principal Place of Business 1053 5th Ave So		2a. Mailing Address 1053 5th Ave So	
21. Suite, Apt. #, etc. Naples, Fla 34102		26. Suite, Apt. #, etc. Naples Fla 34102	
22. City & State Naples Fla		27. City & State Naples Fla	
23. Zip 34102		28. Zip 34102	
24. Country Collier		30. Country Collier	
3. Date Incorporated or Qualified 1996			
3a. Date of Last Report 1996			
4. FEI Number 65-0592939			
Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees			
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
9. Name and Address of Current Registered Agent			
10. Name and Address of New Registered Agent			
81. Name MARGARET QUADE			
82. Street Address (P.O. Box Number is Not Acceptable) 1053 5th Ave So.			
83. City Naples FLORIDA 34102			
84. City FL			
85. Zip Code 34102			
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 hereby sworn, and accept the obligations under Section 607.0505, Florida Statutes.			
SIGNATURE: Margaret Quade			
(NOTE: Registered Agent signature required when reinstating)			
DATE			
12. OFFICERS AND DIRECTORS			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE Margaret Quade			
1.2 NAME President			
1.3 STREET ADDRESS 1053 5th Ave So 34102			
1.4 CITY-ST-ZIP Naples Fla 34102			
2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition			
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition			
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition			
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition			
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition			
6.2 NAME			
6.3 STREET ADDRESS			
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 furnished 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: Margaret Quade			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			
Date: 4/24/97 Daytime Phone #: 941-262-7534			

CR2E034 (9/96)