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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT #

Principal Place of Business

CUDJOE KEY FL 33042

22811 JOHN SILVER LANE

P95000075636 (7)

TL KEYS CONSTRUCTION CORPORATION

Mailing Address
P.O. BOX 420422
SUMMERLAND KEY FL 33042

FILED
Jan 22 1998 8:00am
Secretary of State



DO NOT WRITE IN THIS SPACE

				3. Date Incorporated or Qualified				
Principal Place of Business 2a. Mailing Address					09/27/1995			1. 11 / 12
 '					4. FEI Number	Applied For		
21	26				65-0611482		<u> </u>	Not Applicable
Suite, Apt #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Desired			5 Additional Required
City & State					6. Election Campaign Financing		\$5.	00 May Be
23	28				Trust Fund Contribution	<u></u> _	Add	ied to Fees
Zip Country	Zip	Cou	intry	•	8. This corporation owes or has paid	the curre	ent yea	
24 25	29	30			Personal Property Tax due June 30		Yes	X No
9. Name and Address of Current Registered Agent					10. Name and Address of New Regis	tered A	gent	
KEYS, LARRY E.		ļ	81	Name	'			J
22811 JOHN SILVER LANE			82 Street Address (P.O. Box Number is Not Acceptable)					
CUDJOE KEY FL 33042								į
		[83		1		•	
		}	84	City			85 2	Zip Code
				O.I.y		FL	[]	
11. Pursuant to the provisions of Sections 607.0502	and 607.1508, Florida Statut	es, the at	oove	named corp	poration submits this statement for the pur	ose of	changir	ng its registered
office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligati	Florida, Such change was one of Section 607,0505. Fi	autnorizeo orida Stat	d by utes	ine corpora	tion's board of directors. I hereby accept t	ne appo	intmeni	t as registered
		······			t			(
SIGNATURE Signature, typed or printed name of registered agent	and title if applicable. (NOT	E: Registered	d Ager	nt signature requi	fred when reinstating)	DATE		
12. OFFICERS AND I	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE	RS AND	DIRECT	TORS IN 12
TITLE D	DELETE	1.1 TI	TLE				Chan	ge Addition
NAME KEYS, LARRY E		1.2 NAM						
STREET ADDRESS 25811 JOHN SILVER LANE				ADDRESS				1
CITY-ST-ZIP CUDJOE KEY FL 33042		1.4 CIT						<u> </u>
TITLE	DELETE.	2,1 ())		1-2F			Chan	ge Addition
NAME		2.2 NA						, 100 miles
		2.3 STREET		ADDRESS				
STREET ADDRESS		1						l
CITY-ST-ZIP	DELETE	2. 4 CI 3.1 TIT		T-ZIP			Chan	ge Addition
TITLE	- j ···					ι,	Onair	ge [Addition
NAME	1		3.2 NAME					ł (
STREET ADDRESS	5 33		REET /	ADDRESS				
CITY - ST - ZIP		3.4. CI		T-ZIP				
TITLE	DELETE	4.1 TIT	TLE		'	i	Chan	ge Addition
NAME		4.2 N	AME	}				j
STREET ADDRESS		4.3 STI	reet /	ADDRESS				
CITY-ST-ZIP		4.4 CIT	TY-ST	r-21P	,			
TITLE	DELETE	5.1 TIT	LE			[Chang	ge Addition
NAME		5.2 NA	ME					
STREET ADDRESS		5.3 STI	REET A	ADDRESS				}
CITY - ST - ZIP		5.4 CIT	ry-ST	1-21P				
TITLE	DELETE	6.1 TITLE					Chan	ge Addition
NAME		6.2 NA	6.2 NAME					1
STREET ADDRESS		6.3 STREET AL		ADDRESS				ļ
CITY-ST-ZIP		6.4 CIT						1
14. I hereby certify that the information supplied with	this filing does not qualify for				Section 119.07(3)(i), Florida Statutes, I fur	her cert	ify that	the information

4. 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.

SIGNATURE

TURE AND TYPING OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

//13/97 305/304/1779 Date/ Baycime Provis # 016655