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Jan 22 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000065195 (5)

1. Corporation Name
LTD MANAGEMENT COMPANY

Principal Place of Business

1075 DUVAL STREET 1125
SUITE C-17
KEY WEST FL 33040

Mailing Address

1075 DUVAL STREET
SUITE C-17
KEY WEST FL 33040-3115



3. Date Incorporated or Qualified

08/02/1996

3a. Date of Last Report

2. Principal Place of Business

21 1125 DUVAL STREET

Suite, Apt. #, etc.

22

City & State

23 KEY WEST FL

Zip

24 33040

Country

25 MONROE

2a. Mailing Address

26 1075 DUVAL STREET

Suite, Apt. #, etc.

27

City & State

28 KEY WEST, FL

Zip

29 33040

Country

30 MONROE

4. FEI Number

65-0688355

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

HEFFERNAN, JAMES
1075 DUVAL STREET
SUITE C-17
KEY WEST FL 33040

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

James H. Heffernan

(NOTE: Registered Agent signature required when reinstating)

DATE

1/7/97

12. OFFICERS AND DIRECTORS

TITLE D/P
NAME HEFFERNAN, JAMES
STREET ADDRESS 1075 DUVAL STREET, SUITE C-17
CITY-ST-ZIP KEY WEST FL 33040

TITLE D/S
NAME THOMAS
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D/P
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE D/S
2.2 NAME THOMSON, I. GODFREY
2.3 STREET ADDRESS 1075 DUVAL STREET SUITE C-17
2.4 CITY-ST-ZIP KEY WEST, FL 33040

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

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

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

14. I do 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:

James H. Heffernan

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/7/97

CR2E034 (9/96)