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

## PROFIT CORPORATION

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

## **FILED** Sep 01 1998 8:00am

ANN	1998	Secretary of State DIVISION OF CORPORATIONS			NS	Secretary of State			
DOCU 1. Corporation		96000075594							
G	r <b>as</b> sy Key Pa	rtners, Inc.							
Principal Place of Business Mailing Address							+	1	
1535 SE 17th Street 120 E. Oakland Park Blvd.								, .	
Suite 202 Suite 105						DO NOT WRITE IN TH	IIS <b>B</b> PACE		
Grassy Key, FL 33316 Fort Lauderdale, FL 33334						3. Date incorporated or Qualified 09/11/96			
_	Place of Business	——————————————————————————————————————	iling Address				4. FEI Number	, A	pplied For
Suite, Apt	# elc	26 Su	ite, Apt. #, etc.				65-0692146		ol Applicable
22		27]	(to, Apr. #, 610.				5. Certificate of Status Desired	,	Additional equired
City & Sta	te		City & State				6. Election Campaign Financing \$5.00 May Be		
23		26					Trust Fund Contribution		to Fees
Zip 24	Coun	29		30 Cour	niry		This corporation owes or has paid the Personal Property Tax due June 30.	🗘 Yes 🕻	tangible No
01		ess of Current Registers	d Agent		81	Name	10. Name and Address of New Registers	od Agent	
	opher W. Den:	180n		1				· · · · · · · · · · · · · · · · · · ·	
1300 SE 2nd Street Fort Lauderdale, FL 33301						Street Add	ress (P.O. Box Number is Not Acceptable)		
rott backettate, in 55501					83				
B4						City		. 85 Zip (	Code
						<b>-</b>		i i	
office or	to the provisions of Sec registered agent, or bot	thions 607.0502 and 607.1 h, in the State of Florida. S	508, Florida Statute Such change was a	is, the ab uthorized	ove-i	named corp he corporat	poration submits this statement for the purpose ion's board of directors. I hereby accept the a	≀ <b>of c</b> hanging it p <b>pö</b> intment as	s registered registered
	am tamiliar with, and ac	cept the obligations of, Se	ction 607.0505, Fio	rida Statu	ntes.				1
SIGNATURE	Signature, lyped or printed name	ne of registered agent and little if app	licable (NOTE	Registered	Agent	signature requir	red when reinstating) DATE	· ·	<del></del>
12,		OFFICERS AND DIRECTO		13,			ADDITIONS/CHANGES TO OFFICERS A		RS IN 12
TITLE					1.1 TITLE			Change	☐ Addition
NAME STORES ADDOCCO	Denison, Christopher W.			1.2 NAME					
STREET ADDRESS CITY-ST-ZIP	ESS 1300 SE 2nd Street Ft. Lauderdale. FL			1.3 STREET ADDRESS 1.4 DITY-ST-ZIP					
TITLE	D DELETE			2.1 1(1)		ZIF.		Change	Addition
NAME	Denison, Ann			2.2 NA	ME				_ :
STREET ADDRESS				2.3 STREET ADDRESS					
CITY-ST-ZIP	Ft. Lauderdale, FL			2.4 CiT	_	ZIP			
TITLE	□ DELET€			3.1 TITLE			Change	Addition	
NAME STREET ADDRESS	,			3.2 NAM 3.3 STR		NACOA			
CITY-ST-ZIP				3.4 CIT				i	
TITLE	<del></del>	······································	DELETE	4.1 TITL				☐ Change	Addition
NAME	;			4. 2 NA	ME	ĺ			
STREET ADDRESS				4.3 STR	EET AC	DOMESS		·	
CITY-ST-ZIP				4.4 001	Y-\$1-	ZIP		į	
TITLE			☐ DELETE	51 TITL			800002630:	Change	☐ Addition
NAME STREET ADDRESS				52 NAN			-09/02/3801005	-ñ48	
STREET ADDRESS	;			5.3 STR			***550.00	ψ tO	ł
TITLE		<del></del>	DELETE	5.4 CITS 6.1 TITL		čir —	The second of the second	Change	Addition
NAME				6.2 NAM		1		and something	7.
STREET ADDRESS				8.3 STR		DRESS			₩,
CITY-ST-ZIP				8.4 CITY	Y-ST-	ZIP		1	थ,। ]

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 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 of an attachment with an address.