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Apr 27, 1999 8:00 am
Secretary of State
04-27-1999 90112 038 ***150.00

PROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P97000009339**

1. Corporation Name
KELLY PARK, INC.

Principal Place of Business	Mailing Address
~~340 BUTTONWOOD DRIVE~~ ~~KEY LARGO FL 33037~~ 99607 Overseas Hwy Key Largo FL 33037	~~340 BUTTONWOOD DRIVE~~ ~~KEY LARGO FL 33037~~

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

3. Date Incorporated or Qualifed: 01/30/1997

4. FEI Number: 65-0722197 ☐ 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 owes the current year intangible Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

AMERILAWYER CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PSD	☒ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	~~PARKER, CAROL D~~		1.2 NAME		
STREET ADDRESS	~~340 BUTTONWOOD DRIVE~~		1.3 STREET ADDRESS		
CITY-ST-ZIP	~~KEY LARGO FL 33037~~		1.4 CITY-ST-ZIP		
TITLE	VTD	☐ DELETE	2.1 TITLE	PTD	☒ Change ☐ Addition
NAME	KELLY, JOHN L		2.2 NAME	John Kelly	
STREET ADDRESS	~~340 BUTTONWOOD DRIVE~~		2.3 STREET ADDRESS	99607 Overseas Hwy	
CITY-ST-ZIP	~~KEY LARGO FL 33037~~		2.4 CITY-ST-ZIP	Key Largo, FL 33037	
TITLE		☐ DELETE	3.1 TITLE	VSD	☐ Change ☒ Addition
NAME			3.2 NAME	Joan Kelly	
STREET ADDRESS			3.3 STREET ADDRESS	99607 Overseas Hwy	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	Key Largo, FL 33037	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			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 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, with all other like empowered.

SIGNATURE: John Kelly President 22 April 99 305 451-4575
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (11/98)