

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

1. Entity Name

KEY WEST FAMILY FUN CENTER

P97000063798 ✓

**FILED**  
**Feb 24, 2000 8:00 am**  
**Secretary of State**

02-24-2000 90069 015 \*\*\*158.75

Principal Place of Business

Mailing Address

% EUGENE BEUTH  
6169 ELSINORE CIRCLE  
LAKE WORTH, FL  
33463

2. Principal Place of Business

NONE - INACTIVE

3. Mailing Address

% BEUTH  
6169 ELSINORE CIRCLE  
LAKE WORTH, FL  
33463

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

LAKE WORTH, FL

4. FEI Number

65-0774519

Applied For

Not Applicable

Zip

Country

Zip

Country

33463

USA

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

EUGENE BEUTH

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

6169 ELSINORE CIRCLE

LAKE

City

LAKE WORTH

FL

Zip Code

33463

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

*Eugene C. Beuth*

EUGENE C. BEUTH

1/26/2K

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back)

☒

**FILE NOW!!! FEE IS \$150.00**

**After MAY 1, 2000 Fee will be \$550.00**

**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution.

☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

PRES  
JOHN R. BEUTH

☒ Delete

3535 NORTHSIDE CT  
KEY WEST, FL 33040

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

VP

☒ Delete

KIM BEUTH  
3535 NORTHSIDE CT.  
KEY WEST, FL. 33040

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

~~VP~~

☒ Delete

PHILIP R BEUTH  
464 LAKE SHORE DR.  
PUTNAM VALLEY N.Y. 10579

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

D

☒ Change ☐ Addition

EUGENE C BEUTH  
6169 ELSINORE CIRCLE  
~~KEY WEST~~ LAKE WORTH, FL 33463

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

~~VP~~

☒ Change ☐ Addition

MARY JO A. LALLY-BEUTH  
6169 ELSINORE CIRCLE  
LAKE WORTH, FL 33463

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Eugene C. Beuth* EUGENE C BEUTH

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/26/2K

Date

561 357 9088

Daytime Phone #

CR2E034 (9/99)