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Apr 01 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000084563 (0)

1. Corporation Name

SOUTHEAST KEYBOARDS INVESTMENTS, INC.



Principal Place of Business

2578 JOHN ANDERSON DRIVE
ORMOND BEACH FL 32176-2404

Mailing Address

2578 JOHN ANDERSON DRIVE
ORMOND BEACH FL 32176-2404

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/30/1997

4. FEI Number

59-3474445

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 2190 John Anderson Dr

2a. Mailing Address

26 2190 John Anderson Dr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 Ormond Beach, FL

Zip

24 32176

Country

25 USA

27 City & State

28 Ormond Beach, FL

Zip

29 32176

Country

30 USA

9. Name and Address of Current Registered Agent

PALMETTO CHARTER SERVICES, INC.
150 MAGNOLIA AVE.
ORMOND BEACH FL 33

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME GRIMES, GARY R
STREET ADDRESS 2578 JOHN ANDERSON DRIVE
CITY-ST-ZIP ORMOND BEACH FL 32176-2404

TITLE ☐ DELETE

NAME GRIMES, JUDITH A
STREET ADDRESS 2578 JOHN ANDERSON DRIVE
CITY-ST-ZIP ORMOND BEACH FL 32176-2404

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS 2190 John Anderson Dr

1.4 CITY-ST-ZIP ORMOND BEACH, FL 32176

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS 2190 John Anderson Dr

2.4 CITY-ST-ZIP ORMOND BEACH, FL 32176

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME VP

3.3 STREET ADDRESS VISCIELLE, Joseph

3.4 CITY-ST-ZIP 11234 WOME AVE

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME SIEBERT, DIANA

4.3 STREET ADDRESS 4716 Chaldonnay Lane

4.4 CITY-ST-ZIP PORT ORANGE, FL 32119

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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.

SIGNATURE Diana Siefert 3/25/98 914-761-9584

CR2E034 (10/97)