

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

PROFIT
CORPORATION
ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # **P98000033993**

1. Corporation Name:

FKY, Inc.

Principal Place of Business

**419 Concha Drive
Sebastian, FL
32958**

Mailing Address

**419 Concha Drive
Sebastian, FL 32958**

2. Principal Place of Business

21 Florida

Suite, Apt. #, etc.

22 City & State

23 Sebastian, FL

Zip

Country

24 32958

Country

25 Indian River 32958

2a. Mailing Address

26 419 Concha Drive

Suite, Apt. #, etc.

27 City & State

28 Sebastian, FL

Zip

Country

30 Indian River

9. Name and Address of Current Registered Agent

**Christine Yarbrough
1579 Eastlake Lane
Sebastian, FL 32958**

81. Name

Christine Yarbrough

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

419 Concha Drive

83.

84. City **Sebastian**

FL

85. Zip Code
32958

11. Pursuant to the provisions of Sections 607.0512 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

Christine Yarbrough

3/22/99

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**Helen C. Yarbrough, Pres.
419 Concha Drive
Sebastian, FL 32958**

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**Secretary
Christine Yarbrough
419 Concha Drive
Sebastian, FL 32958**

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13.

13.1 TITLE
13.2 NAME
13.3 STREET ADDRESS
13.4 CITY-STATE-ZIP
13.5 TITLE
13.6 NAME
13.7 STREET ADDRESS
13.8 CITY-STATE-ZIP
13.9 TITLE
13.10 NAME
13.11 STREET ADDRESS
13.12 CITY-STATE-ZIP
13.13 TITLE
13.14 NAME
13.15 STREET ADDRESS
13.16 CITY-STATE-ZIP
13.17 TITLE
13.18 NAME
13.19 STREET ADDRESS
13.20 CITY-STATE-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

7000002827157-8
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******150.00 ****150.00**

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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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: *Helen C. Yarbrough*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Helen C. Yarbrough, President

March 22, 1999

(561)234-5500

CR2E034 (11/98)