Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90097 025 \*\*\*150.00

## 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 # P98000055842

1. Corporation Name

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIF

TITLE

NAME

TITLE

NAME

TITLE

TITLE

NAME

**COLTS NECK NJ 07722** 

TREASURE KEY RESORT, INC.

Principal Place of Business	· · · · · · · · · · · · · · · · · · ·	Mailing Address					
20 N ORANGE AVE. SUITE 1000 ORLANDO FL 32801		20 N ORANGE AVE. SUITE 1000 ORLANDO FL 32801					
						DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualifed 06/23/1998	
		2a. Mailing Address				4.\FEI Number   Applied For	
2. Principal Place of Business		26. Walling Address				59-3522268 Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			J	5. Certificate of Status Desired   \$8.75 Additional Fee Required		
22 27 27 City & State 22 28 28			-: 🛫	6. Election Campaign Financing – S5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country Zip Co			Country		8. This corporation owes the current year Intangible	
24	25 29 30		30	Personal Property Tax.			
Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent	
				81	Name	•	
HARDING, ROBERT L				82 Street Address (P.O. Box Number is Not Acceptable)			
20 N ORANGE AVE, SUITE 1000							
ORLANDO FL 32801				83			
				84 City FL 85 Zip Code			
office or registered ag agent. I am familiar wi	ent, or both, in the State of the obligation	ions of, Section 607.050	5, Florida	Statutes.	ine corpc	d corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered required when reinstating)  DATE	
Signature, types or printed frame or regularize agost one and				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE D				1.1 TITLE	$\neg$	Mac Change	
1	ALLEGE BRUCE			1.2 NAME			
MATELL, DITOLE			1.3 STREET	ADDRESS	2 Evergreen Lane		
SINCELY ADDITION ET DISTUTION ET			1.4 CITY-S1	-ZIP	Coltanick no 07722		
TITLE D		☐ DELE	TE	2.1 TITLE		Change Addition	
The state of the s			2.2 NAME		9		
<b>1</b>			2.3 STREET	ADDRESS	2 Evergreen Lane Colts Nick, N. g. 07722  Change Addition  2 Evergreen Lane		

STREET ADDRESS 6.4 CITY-ST-ZIP 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.

2.4 CITY+ST+ZIP

3.3 STREET ADDRESS

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

3.4. CITY-ST-ZIP

3.1 TITLE

3.2 NAME

4.1 TITLE

4.2 NAME

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

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Addition

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Addition

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Change