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

PROFIT CORPORATION ANNUAL REPORT

1997

DOCUMENT # \$28221

KEY CAPITAL CORPORATION



FLORIDA DEPARTMENT OF STAT

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

(7)

## FILED Apr 15 1997 8:00am Secretary of State

Principal Place of Business	Mailing Address			
1722 S MISSOURI AVE CLEARWATER FL 34616	1722 S MISSOURI AVE CLEARWATER FL 34616-1223			
		3. Date Incorporated or Qualified 01/28/1991	3a, Date of Last Report 04/23/1996	

	I Place of Business	2a, Mailing Addre	`8 <b>\$</b>		4. FEI Number	Applied For	
21		26			59-3049779	Not Applicable	
Suite, A	pt. #, etc.	Surte, Apt. #, e	etc.		5. Certificate of Status Desired	<b>\$8.75</b> Additional Fee Required	
City & S 23	tate	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zφ	Country		8. This corporation has liability for intar	ngible tax under s. 199.032,	
24	25	[29]	30		Florida Statutes XI Yo	s 🗌 No	
	g, Name and Addres	ss of Current Registered Agent		,	10. Name and Address of New Regist	ered Agent	
IMDIUN, M. E.			81	Name			
			82	82 Street Address (P.O. Box Number is Not Acceptable)			
			83	83			
			84	City		85 Zip Code	
			04	City		FL S 210 COOR	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes							
SIGNATURE Signature, typed or prefet barine of registers a great and steril applicable (fs.Oth) Begistered Agent signer one required when remissioning). DATE							
12.		FICERS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	D	[_] DEL	.ETE 11111LF			L Change Addition	
NAME	SHEA, JOHN B.		1.2 NAME				
STREET ADDRES		AVE	1.3 \$1REE?	ADDRESS			
CITY-ST-ZIP	CLEARWATER FL		14 CITY - S	1. ZIP			
TITLE		□ DEL	ETE STANTE			Change Addition	
NAME			2.2 NAME				
STREET ADDRES	SS		23 \$1RF1	ADDRESS		·	
CITY-ST-ZIP			2.4 CITY-5	ST - 71P			
TITLE		□ DE1	ETE 31 TITLE			Change Addition	
NAME			3.2 NAME				
STREET ADDRES	38		3.3 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CITY-S	1 - 7#			
TITLE		□ DEI				L.) Change L. Addition	
NAME			4 2 NAME				
STREET ADDRES	SS		43 STREET	ADDRESS			
CITY-ST-ZIP			4 4 CHY- S	1 - 716		n e en <del>gra</del> nsko e en en <del>gra</del> n kenten en	
TITLE		□ DEA	ETE 5.1 Table			Change Addition	
NAME			5.2 NAM				
STREET ADDRES	is		5.3 STREET	ADDRESS			
CITY-ST-ZIP			54 CHY-S	1 - ZIP			
TITLE		□ DEL				Change Addition	
NAME			G 2 NAME				
STREET ADDRES	SS		6.3 STREET	ADDRESS			
CITY-ST-ZIP			6.4 C(1) Y - S	1 - 201			

14. I do 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.

MARIAN COLLAR TOUR & SHEA POSS 'SELOUGH