FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



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

DCCL	IMENT	#
DUUU	'	π

C22712

(5)

1. Corporation Name WINDLEY KEY PROPERTIES, INC.								
Principal Place o 84001 OVER: ISLAMORAD/	SEAS HIGHWAY	Mailing Address 84001 OVERSEAS H ISLAMORADA FL 33				1801 3611 0101	II 31911 \$1911 911	iil 918 41 918 71 18 3 1
					3. Date Incorporated or Qualified 02/25/1991	3a. Da	of Last R 02/27/1	
2. Principal Plac	e of Business	2a. Maing Address 26			4. FEI Number 65-0336467		⊢	Applied For Not Applicable
Suite, Apt. #,	etc.	Suite, Apt. #. etc.	· · · · · · · · · · · · · · · · · · ·		5. Certificate of Status Desired)	\$8.75	Additional Required
City & State		City & State			6. Election Campaign Financing		\$5.0	O May Be
Zip	Country	28 Zip	Country		Trust Fund Contribution 8. This corporation has liability for			d to Fees 199.032,
24	25	29	30		Florida Statutes Yes	No No	d Apont	
	9. Name and Address of Current	negistereo Agent	81	Name	10. Name and Address of New I	negistere	u Agent	
ROTH.	JOSEPH H.		82	Stroot Add	ress (P.O. Box Number is Not Accepta	nlo!		
•	OVERSEAS HWY.			Street Add	ress (ro. box interned is mocroscopie			
ISLAMO	RADA FL 33036		83					
			84	City		F	85 Zig	p Code
SIGNATURE	and accept the obligations of, Sectionary and rectanged the objection of the process of the process of the objection of the o	of the Capation of the DIRECTORS	the English of Age	a signal recreasion	edwice enabling ADDITIONS/CHANGES TO OFI	DATE		
TITLE	OPD CELANITANIO VINCENIT D	☐ DELETE	1 1 TITLE				☐ Change	Addition
NAME STREET ADDRESS	CELANTANO, VINCENT D 987 HILLSBORO MILE		1.2 NAME 1.3 STREET	2236004				
CITY-ST-ZIF	HILLSBORO BEACH FL		14 CITY - :					
TITLE	SD	☐ DELETE	2 1 THLE		TABLE OF THE STATE		Change	roilibbA 📋
NAME	ROTH, JOSEPH H JR		2.2 NAME					
STREET ADORESS	84001 OVERSEAS HIGHWAY ISLAMORADA FL		2351866					
CITY - ST - ZIP	D	☐ DELETE	2.4 Offy - : 3.1 Tifle	21-712			Change	Addition
NAME	LORICCO, RICHARD A		3.2 NAME					
STREET ADDRESS	138 ORANGE STREET		33 STHEE	7 ADDRESS				
C(TY-ST-ZIP	NEW HAVEN CT		3.4 CITY	ST - ZIP			Ch	
TITLE		[DFIE1F	4 1 TITLE				☐ Change	Addition
NAME STREET ADDRESS			4.2 NAME	ADDRESS				
CITY-ST-ZIP			4.4 CITY - 1					
TETLE		DELETE	5 1 TIFLE				Change	Addit on
NAME			5.2 NAME					
STREET ADDRESS			5 3 STREE	ADDRESS				
CITY-ST-ZIP		TO DELETE	5 4 C(1 y - 1	ST - ZIP				T) Addition
TITLE		☐ DEL€TE	6 1 JULE				Change	Addition
NAME STREET ADDRESS			6.2 NAME	I ADDRESS				
CITY-ST-ZP			6.4.0HY-					
14. I do hereby certify that t oath; that I :	he information indicated op trifs annua	I report or supplemental and	nished and doe lual report is tr	s not qualify ue and accur	for the exemption stated in Section 119 ate and that my signature shall have th iis report as required by Chapter 607, F	same leç	jal effect as it	f made under

SIGNATURE: ___

SIGNATURE AND VIEW OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOSEPH H. ROTH, JR. SECRETARY/DIRECTOR

(305) 664-2321