

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR -7 AM 4:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S34144 (3)

1. Corporation Name

LAND AND SEA, INC.

Principal Place of Business

Mailing Address

**C/O J. MURPHY
825 SEMINARY
KEY WEST FL 33040**

**C/O J. MURPHY
825 SEMINARY
KEY WEST FL 33040**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/22/1991

3a. Date of Last Report

05/01/1994

4. FEI Number

**APATE CORPACT
65-0110589 65-0499678**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MILLS, MARGARET TOBIN

-201 FRONT ST-

STE 104

KEY WEST FL 33040

81 Name

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

818 WHITE ST

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)

(Printed, Registered Agent signature required when mandatory)

(Date)

12. OFFICERS AND DIRECTORS

TITLE **D**
NAME **MURPHY, JOHN F.**
STREET ADDRESS **825 SEMINARY ST**
CITY, ST, ZIP **KEY WEST FL**

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

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CITY, ST, ZIP

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CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **CEO, D** ☒ Change ☐ Addition

1.2 NAME **JOHN F. MURPHY**

1.3 STREET ADDRESS **925 SEMINARY ST**

1.4 CITY, ST, ZIP **KEY WEST FL 33040**

2.1 TITLE **PRES, D** ☐ Change ☒ Addition

2.2 NAME **BILL BRYANT**

2.3 STREET ADDRESS **1322 OLIVIA ST**

2.4 CITY, ST, ZIP **KEY WEST FL 33040**

3.1 TITLE **V. PRES, D** ☐ Change ☒ Addition

3.2 NAME **EMMA CATES**

3.3 STREET ADDRESS **2910 FOGARTY AVE**

3.4 CITY, ST, ZIP **KEY WEST FL 33040**

4.1 TITLE **SAC/THIAS** ☐ Change ☒ Addition

4.2 NAME **NORMI MURPHY**

4.3 STREET ADDRESS **925 SEMINARY ST**

4.4 CITY, ST, ZIP **KEY WEST FL 33040**

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, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 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 or changed, or on an attachment with an address.

SIGNATURE:

(Signature and typed or printed name of signing officer or director)

JOHN F. MURPHY

4/3/95

305-296-7001