

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

APPROVED
AND
FILED

95 SEP 14 AM 7:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



PROFIT CORPORATION ANNUAL REPORT 1996

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

DOCUMENT # V09927 (7)
1. Corporation Name
SAND KEY COMMUNITIES INC.

Principal Place of Business
12600 BELCHER RD
STE 102 J
LARGO FL 34643
US

Mailing Address
12600 BELCHER RD
STE 102 J
SEMINOLE FL 34643
US

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	Zip
Country	Country
24	29
25	30

3. Date Incorporated or Qualified 01/27/1992	3a. Date of Last Report 05/01/1995
4. FEI Number 26-3080967	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	

9. Name and Address of Current Registered Agent

JOHNSON, GLEN R.
8005 BARDMOOR PLACE #201
LARGO FL 34647

10. Name and Address of New Registered Agent

81 Name Johnson, Glen R.
82 Street Address (P.O. Box Number is Not Acceptable)
416-20th Ave
83
84 Indian Rocks FL 33785

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 then applicable

(If 31E Registered Agent signature required when registering)

(Date)

OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	JOHNSON, GLEN R.	
STREET ADDRESS	8005 BARDMOOR PL. #201	
CITY-ST-ZIP	LARGO FL 34647	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY-ST-ZIP
21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY-ST-ZIP
31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY-ST-ZIP
41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY-ST-ZIP
51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY-ST-ZIP
61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY-ST-ZIP

Change ☐ Addition ☐

200001949202
-09/17/96--01110--004
****383.75 ****383.75

9/13

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(f), 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 617, Florida Statutes, and that my name appears in Block 9 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/96)