

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

FILED
Mar 22, 1999 8:00 am
Secretary of State

03-22-1999 90020 041 ***158.75

DOCUMENT # V60853

1. Corporation Name

STRAND KEY WEST ENTERTAINMENT CORP.

Principal Place of Business

3044 SHEPARD OF THE HILLS EXPRESSWAY
SUITE 307
BRANSON MO 65616
US

Mailing Address

3044 SHEPARD OF THE HILLS EXPRESSWAY
SUITE 307
BRANSON F 65616
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/31/1992

4. FEI Number

59-3139537

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

LOONEY, STEPHEN R
200 SOUTH ORNAGE AVENUE
SUN BANK CENTER SUITE 3000
ORLANDO FL 32801

10. Name and Address of New Registered Agent

81 Name

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

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS ☐ DELETE

TITLE DP
NAME JOHNSON, KAREL G.
STREET ADDRESS 1495 LANDS END RD
CITY-ST-ZIP MANALAPAN FL 33462

TITLE DT
NAME GRAY, DAVID
STREET ADDRESS 3545 OCEAN DR
CITY-ST-ZIP VERO BEACH FL

TITLE SD
NAME SMITH, JEREMY
STREET ADDRESS 391 SCOTTSDALE DRIVE
CITY-ST-ZIP GUELPH ON

TITLE V ☒ DELETE
NAME ACHTERBERG, CHARLES R
STREET ADDRESS 3044 SHEPARD OF THE HILLS EXPWY #307
CITY-ST-ZIP BRANSON MO

TITLE AS ☐ DELETE
NAME STEWART, PEGGY
STREET ADDRESS 3044 SHEPARD OF THE HILLS EXPWY #307
CITY-ST-ZIP BRANSON MO

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE SD ☒ Change ☐ Addition
3.2 NAME SMITH, JEREMY
3.3 STREET ADDRESS 167 Fife Road
3.4 CITY-ST-ZIP Guelph, ON N1H 7J3

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

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 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.

SIGNATURE: AS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/6/99

Date

417-339-4405

Daytime Phone #

CR2E034 (1/1/98)

0584327