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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 393088

1. Corporation Name
KAUFFS OF PALM BEACH, INC.



Principal Place of Business
 1440 WEST 53RD ST
 WEST PALM BEACH, FL 33407
 US

Mailing Address
 1418 10TH CT
 LAKE PARK FL 33403-2007
 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
 12/27/1971

4. FEI Number
 59-1371159

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 7704 Basswood Drive
 Suite, Apt. #, etc.
 22
 City & State
 23 Chattanooga, TN
 Zip Country
 24 37416 25 USA

2a. Mailing Address
 26 7704 Basswood Drive
 Suite, Apt. #, etc.
 27
 City & State
 28 Chattanooga, TN
 Zip Country
 29 37416 30 USA

9. Name and Address of Current Registered Agent
KAUFF, RICHARD L.
7660 BOLD LAD ROAD
PALM BEACH GARDENS FL 33418

10. Name and Address of New Registered Agent

81 Name
 Corporation Service Company

82 Street Address (P.O. Box Number is Not Acceptable)
 1201 Hays Street

83

84 City Tallahassee FL 85 Zip Code 32301

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 *April L. Roberts* April L. Roberts, Authorized Representative for Corporation Service Company 3/26/99
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	KAUFF, RICHARD L	
STREET ADDRESS	7660 BOLD LAD RD	
CITY-ST-ZIP	PALM BCH GARDENS FL	
TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	STRICKLAND, JANET I.	
STREET ADDRESS	15400 CONNERS HWY SW	
CITY-ST-ZIP	OKEECHOBEE FL	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	KAUFF, W. HOWARD	
STREET ADDRESS	5660 WAR ADMIRAL RD.	
CITY-ST-ZIP	PALM BEACH GARDENS FL	
TITLE	T	<input checked="" type="checkbox"/> DELETE
NAME	KAUFF, KAROL R.	
STREET ADDRESS	7660 BOLD LAD RD.	
CITY-ST-ZIP	PALM BCH GARDENS FL	
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	O'DONNELL, JAMES	
STREET ADDRESS	1274 SLASH PINE CIR	
CITY-ST-ZIP	W PALM BCH FL	
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	CROWDER, WESLEY B	
STREET ADDRESS	1119 11TH LANE	
CITY-ST-ZIP	PALM BEACH GARDENS FL 33418	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Wesley B. Crowder	
1.3 STREET ADDRESS	1304 Old Okeechobee Rd.	
1.4 CITY-ST-ZIP	West Palm Beach FL 33401	
2.1 TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	John Maynard	
2.3 STREET ADDRESS	7704 Basswood Dr.	
2.4 CITY-ST-ZIP	Chattanooga TN 37416	
3.1 TITLE	ST	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Eric N. Wexler	
3.3 STREET ADDRESS	7704 Basswood Dr.	
3.4 CITY-ST-ZIP	Chattanooga TN 37416	
4.1 TITLE	AS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Douglas A. Kaye	
4.3 STREET ADDRESS	7704 Basswood Dr.	
4.4 CITY-ST-ZIP	Chattanooga TN 37416	
5.1 TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Jeffrey I. Badgley	
5.3 STREET ADDRESS	8503 Hilltop Dr.	
5.4 CITY-ST-ZIP	Doltawah TN 37363	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: *Wesley B. Crowder* 4-1-99 Date Daytime Phone #

CR2E034 (11/98)