

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 450600 (2)

1. Corporation Name  
**KRAFT CONSTRUCTION COMPANY, INC.**



Principal Place of Business: 2606 S. HORSESHOE DRIVE NAPLES FL 33942  
Mailing Address: 2606 S. HORSESHOE DRIVE NAPLES FL 33942

3. Date Incorporated or Qualified: 04/18/1974  
3a. Date of Last Report: 05/01/1995

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

4. FEI Number	Applied For
59-1530885	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
<input type="checkbox"/>	
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
<input type="checkbox"/>	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
<input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

CARSELLO, ROBERT L.  
2606 S. HORSESHOE DRIVE  
NAPLES FL 33942

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: \_\_\_\_\_ DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
PD	CARSELLO, ROBERT L.	5948 CHANTECLAIR DR.	NAPLES FL 01	<input type="checkbox"/>
SD	CARSELLO, MARY J	5948 CHANTECLAIR DR.	NAPLES FL	<input type="checkbox"/>
VD	PEZESHKAN, FARHAD	P.O. BOX 10733 NA	NAPLES FL	<input type="checkbox"/>
TD	DEHNART, DAVID	2606 SOUTH HORSESHOE DR.	NAPLES FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
12					<input type="checkbox"/>	<input type="checkbox"/>
22					<input type="checkbox"/>	<input type="checkbox"/>
32					<input type="checkbox"/>	<input type="checkbox"/>
42					<input type="checkbox"/>	<input type="checkbox"/>
52					<input type="checkbox"/>	<input type="checkbox"/>
62					<input type="checkbox"/>	<input type="checkbox"/>
64					<input type="checkbox"/>	<input type="checkbox"/>

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)(k), 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.

SIGNATURE: \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

18 APRIL 1996 (941) 643-6000  
Date Daytime Phone #

CR2E034 (12/95)