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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 484073

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KATY-BILL CORPORATION

FILED
Apr 21 1997 8:00am
Secretary of State

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FT MYERS FL			S FL 33912-1946	}							
							3. Date Incorporated 09/08/1975	or Qualified	J	e of Last F	leport
2. Principal	Place of Business	2a. Maili	ng Address	***************************************			4. FEI Number		-I	Ar	oplied For
21		26					59-1581183				ot Applicable
Suite, Api	t #, etc	Suite 27	e, Apt. #, etc.				5. Certificate of State	s Desired			Additional equired
City & Sta	ato		& State				6. Election Campaig	n Financino			May Be
23		28					Trust Fund Contri	•			to Fees
2 _{(p}	Country	Zip			untry	/	8. This corporation h				. 199.032,
24	25	29		30	·		Florida Statutes		Yes 🗌		
	9. Name and Address of Cu	rrent Hegistered	Agent		81	Name	10. Name and Addre	SS OT NEW HE	pistered A	gent	
	CKE, WILLIAM J.				0	inatile					
	08 S. TAMIAMI TRAIL				82	Street Add	ress (P.O. Box Number is	Not Acceptab	le)		
FI	MYERS FL 33912				63	 					
					84	City	!		FL	85 Zip	Code
11. Pursuan office or	it to the provisions of Sections 607, registered agent, or both, in the S am familiar with, and accept the ol	0502 and 607.15 tate of Florida, Su	08, Florida Statu ich change was	utes, the a authorize	bov d b	e-named corp y the corporat	poration submits this stati tion's board of directors.	ement for the p I hereby accer	urpose of o at the appo	changing in intment as	is registered registered
SIGNATURE	•	มหมูสหตกราชา, อยด	tion 607.0305, F	TOTICE SIA	nute:	5.					
	Signature, typed or printed name of registere-					ent signature requi	red when reinstaling)		DATE		
12.	OFFICERS	AND DIRECTOR	S DELETE	13.			ADDITIONS/CHAN	GES TO OFFIC		DIRECTOR Change	RS IN 12
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14. I do 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.

SIGNATURE:

ATURE AND TYPED ON PRINTED NAME OF SKONING OFFICER OR DIRECTOR

(941-481-8711

Date

Daytime Phone #

334 (9/96)