FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **F95000002573 (2)**

1. Corporation Name

DAN KUYKENDALL ENTERPRISES, INC.

Principal Place of Business

115 S. TRAVIS ST
SHERMAN TX 75090

Mailing Address

115 S. TRAVIS ST
SHERMAN TX 75090

3. Date Incorporated or Qualified: **05/26/1995**

3a. Date of Last Report

2. Principal Place of Business
21
Street Address
22
City & State
23
Zip 24 County 25

2a. Mailing Address
26
Street Address
27
City & State
28
Zip 29 County 30

4. FEI Number: **75-2295017** ☐ 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

SKRLD, INC.
201 ALHAMBRA CIRCLE #1102
CORAL GABLES FL 33134

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 Section 607.0502 or 617.1502, 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: CP
Name: KUYKENDALL, DAN
Street Address: 2210 MEADOWS LANE
City-St-Zip: SHERMAN TX 75092
☐ DELETE

Title: VSTD
Name: KUYKENDALL, RHONDA J
Street Address: 2210 MEADOWS LANE
City-St-Zip: SHERMAN TX 75092
☐ DELETE

Title / Name / Street Address / City-St-Zip
☐ DELETE

Title / Name / Street Address / City-St-Zip
☐ DELETE

Title / Name / Street Address / City-St-Zip
☐ DELETE

Title / Name / Street Address / City-St-Zip
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Title / Name / Street Address / City-St-Zip
☐ Change ☐ Addition

Title / Name / Street Address / City-St-Zip
☐ Change ☐ Addition

Title / Name / Street Address / City-St-Zip
☐ Change ☐ Addition

Title / Name / Street Address / City-St-Zip
☐ Change ☐ Addition

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☐ Change ☐ Addition

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☐ Change ☐ Addition

CR2E034 (12/95)

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 report or supplemental 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 above, or on an attachment with all other like empowered.

SIGNATURE: DAN KUYKENDALL 1-15-96 9038700091

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date