2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2002 8:00 AM
Secretary of State

DOCUMENT# F98000006076

Entity Name: KISTERS KAYAT, INC.

Current Principal Place of Business:

4100 U.S. HWY #1
EDGEWATER, FL 32141

New Principal Place of Business:

Current Mailing Address:

4100 U.S. HWY #1
EDGEWATER, FL 32141

New Mailing Address:

FEI Number: 61-1149049 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WELCH, PETER
4100 U.S. HIGHWAY #1 SOUTH
EDGEWATER, FL 32141 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____
Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so ( ).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: NEAGLE, C A
Address: 3044 BELLE MEADE LANE
City-St-Zip: EDGEWOOD, KY

Title: VSD ( ) Delete
Name: BROOKING, JOHN
Address: 233 CHAMBERS ROAD
City-St-Zip: WALTON, KY

Title: T ( ) Delete
Name: WELCH, PETER
Address: 6194 HALF MOON DR.
City-St-Zip: PORT ORANGE, FL 32127

Title: CD ( ) Delete
Name: MARTI, JEAN
Address: D-47533 KLEVE
City-St-Zip: GERMANY,

Title: D ( ) Delete
Name: KORTH, HAROLD
Address: D-47533 KLEVE
City-St-Zip: GERMANY,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: NEAGLE, C A
Address: 3044 BELLE MEADE LANE
City-St-Zip: EDGEWOOD, KY 41017

Title: VSD (X) Change ( ) Addition
Name: BROOKING, JOHN
Address: 233 CHAMBERS ROAD
City-St-Zip: WALTON, KY 41094

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PETER WELCH T 01/30/2002
Electronic Signature of Signing Officer or Director Date