

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 # **K89544** (6)
1. Corporation Name
KUBAL - FURR & ASSOCIATES, INC.



Principal Place of Business
**7821 N. DALE MABRY HWY
SUITE 106
TAMPA FL 33614
US**

Mailing Address
**%JERRY E. KUBAL
P.O. BOX 273210
TAMPA FL 33688-3210**

3. Date Incorporated or Qualified **05/19/1989** 3a. Date of Last Report **04/26/1995**

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21 7819 N. DALE MABRY HWY	26	59-2989146	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	☐ \$8.75 Additional Fee Required
22 SUITE 200	27	6. Election Campaign Financing	☐ \$5.00 May Be Added to Fees
City & State	City & State	Trust Fund Contribution	
23	28	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	☐ Yes ☐ No
Zip	Zip		
24	29		
Country	Country		
25	30		

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KUBAL, JERRY E.
14801 DUNSTAN PLACE
TAMPA FL 33618**

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

Signature, typed or printed name of registered agent, and date of appointment

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DP	☐ DELETE
NAME	KUBAL, JERRY E.	
STREET ADDRESS	14801 DUNSTAN PLACE	
CITY - ST - ZIP	TAMPA FL	
TITLE	DV	☐ DELETE
NAME	FURR, JAMES E.	
STREET ADDRESS	313 DEER SPRING LANE	
CITY - ST - ZIP	SIMPSONVILLE SC	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

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

Jerry E. Kubal (JERRY E. KUBAL)

4/15/96

813/931-7730

CR2E034 (12/95)