

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 # L09818 (0)

1. Corporation Name
KAY'S HALLMARK SHOP, INC.



Principal Place of Business
15000-14 SAN CARLOS BLVD
FT MYERS FL 33908

Mailing Address
15000-14 SAN CARLOS BLVD
FT MYERS FL 33908

3. Date Incorporated or Qualified 08/16/1989	3a. Date of Last Report 04/26/1995
4. FEI Number 65-0138360	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	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent

AMES, JEROME J.
1012 DOLPHIN DR
CAPE CORAL FL 33904

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	FL

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: Jerome J. Ames ST

(NOTE: Registered Agent Signature required when re-stating agent)

(DATE)

4-4-96

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	DP
NAME	AMES, JEROME J.	1.2 NAME	Ames, Kay F.
STREET ADDRESS	1012 DOLPHIN DR	1.3 STREET ADDRESS	1012 DOLPHIN DR.
CITY-STATE-ZIP	CAPE CORAL FL	1.4 CITY-STATE-ZIP	CAPE CORAL, FL. 33904
TITLE	DST	2.1 TITLE	V Ames, Jerome J., Jr.
NAME	AMES, KAY F.	2.2 NAME	
STREET ADDRESS	1012 DOLPHIN DR	2.3 STREET ADDRESS	4411 CORANADO PKWY.
CITY-STATE-ZIP	CAPE CORAL FL	2.4 CITY-STATE-ZIP	CAPE CORAL, FL. 33904
TITLE	V	3.1 TITLE	ST
NAME	GAUBATZ, JAMES D.	3.2 NAME	Ames, Jerome J.
STREET ADDRESS	136 BAY MAR	3.3 STREET ADDRESS	1012 DOLPHIN DR.
CITY-STATE-ZIP	FT. MYERS BCH FL	3.4 CITY-STATE-ZIP	CAPE CORAL, FL. 33904
TITLE		4.1 TITLE	V
NAME		4.2 NAME	Gaubatz, James D.
STREET ADDRESS		4.3 STREET ADDRESS	221 S.W. 34TH TR.
CITY-STATE-ZIP		4.4 CITY-STATE-ZIP	CAPE CORAL, FL. 33914
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-STATE-ZIP		5.4 CITY-STATE-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-STATE-ZIP		6.4 CITY-STATE-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:

Kay F. Ames
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-4-96 941-945-3224
Date/Time Phone #

CR2E034 (12/95)