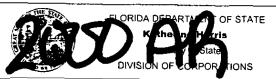
Applied For

\$8.75 Additional

Not Applicable

PROFIT CORPORATION ANNUAL REPORT



DOCUMENT # 148041

Corporation Name KINGSWIOOD SPROTT, INC.

rincipal Place of Business III CANYON LAKE POINT AKELAND FL 33813

Principal Place of Business

Suite, Apt. #, etc.

١.

Mailing Address

2a. Mailing Address

Suite, Apt. #, etc.

4020 CANYON LAKE PT. LAKELAND FL 33813

26

FILED 00 APR 10 PM 2: 36

SECRETARY OF STATE TALEARASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

07/31/1946

59-0613365

4. FEI Number

27						5. Certificate of Status Desired
City & State City & State						6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
Zip	Country	Zip	Cou	intry		This corporation owes the current year Intangible
	25	29	30			Personal Property Tax.
	 Name and Address of Currer 	nt Registered Agent				10. Name and Address of New Registered Agent
	ROTT, KINGSWOOD JR	`		81	Name	
. 4020 CANYON LAKE PT. LAKELAND FL 33813						ress (P.O. Box Number is Not Acceptable)
	12 110 12 000 10			83		
				84	City	FL 85 Zip Code
Pursuant	to the provisions of Sections 607.050	2 and 607 1509 Florida Ct-1	.4			oration submits this statement for the purpose of changing its registered
	am familiar with, and accept the obliga	tions of, Section 607.0505, FI	orida Statı	ites.	me corporant	on's board or directors. I hereby accept the appointment as registered
		D DIRECTORS	13.	Agein	r zignature reduire	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
	PTD	☐ DELETE	1,1 717	16		
	SPROTT, KINGSWOOD JR				1	☐ Change ☐ Addition
ET ADDRESS	1000 011010111111			12 NAME		
ST-ZIP	LAKELAND FL		1357	13 STREET ADDRESS		7000032138474
51-ZIP	VS		14 CIT		-ZIP	<u>-04/19/0001010007</u>
	SPROTT, CLYDE R.	☐ DELETE	2.1 ∏₹	ΓĒ		****150.00 \\ \$\text{\$\exitt{\$\exitt{\$\text{\$\text{\$\exitt{\$\xitt{\$\xittt{\$\text{\$\exitt{\$\xitt{\$\xitttit{\$\titt{\$\tittt{\$\xittt{\$\xitttt{\$\xitttt{\$\xittt{\$\xittt{\$\xittt{\$\xitttt{\$\xitttt{\$\xittt{\$\xittt{\$\xittt{\$\xitttit{\$\xittt{\$\xitttit{\$\xitttt{\$\tittt{\$\xitttit{\$\xitttit{\$\xitttit{\$\xitttitt{\$\xitttit{\$\exitttit{\$\exitttitt{\$\exitttit{\$\exitttitt{\$\exitttit{\$\exittitt{\$\exitttit{\$\exitttit{\$\exittittit{\$\exittit{\$\exittit{\$\exittit{\$\exittit{\$\exittit{\$\exittit{\$\exittitt{\$\exittit{\$\exittit{\$\exittit{\$\exittit{\$\exittit{\$\exittittitt{\$\exittittit{\$\exittittit{\$\exittit{\$\exittittit{\$\exittittit
	4000 0418401444		2.2 NA	ME		
T ADDRESS			2.3 ST	REET	ADDRESS	
ST-ZIP	LAKELAND FL	<u></u>	2. 4 Cr	TY-ST	r-ZIP	
		☐ DELETE	3,1 TIT	LE		☐ Change ☐ Addition
			3.2 NA	ME		
T ADDRESS.			3.3 \$17	REET	ADDRESS	
ST-ZIP			3.4. CIT			
		☐ DELETE	4.1 TIT	_		Change Addition
			4. 2 NA			C. Change C. Addition
TADDRESS						
ST-ZIP					ADDRESS	
31-23F	· -	DELETE	4.4 CIT		ZIP	
ſ			5.1 TT			☐ Change ☐ Addition
			5.2 NAA			
TADDRESS			5.3 STR	REETA	ADDRESS	
T-ZIP			5.4 CIT		ZIP	
		☐ DELETE	6.1 TITL	E		☐ Change ☐ Addition
}			62 NAA	Æ		_ _
TADDRESS			6.3 STR	EET A	UDDRESS	
T-ZIP			6.4 CITS	/. ST.	7IP	KE

I hereby certify that the information supplied with this fiting 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 of 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, with all other like empowered.

IGNATURE:

8-15-99