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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 194216

KIRBY SMITH GROVES, INC.

DOCUMENT #

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| Secretary of State | |



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| Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Country Zip Country Zip Country 28 Name and Address of Current Registered Agent SMITH, W.A. S300 EAST GRANT STREET ORLANDO FL 32812 11. Pursuant to the provisions of Sections 607.0507 and 607.1508, Florida Statutes, the above-named corporation submits this sit office or registered agent, or both, in the State of Florida. Such change was authorized by the corporations board of directors agent. I am lamiliar with, and accept the obligations of, Section 607.0506, Florida Statutes. SIGNATURE Signature, hyperior printed name of registered agent and thic if a pricable SMITH, W.A. STREET ADDRESS CITY-S1-ZIP ORLANDO FL DELETE DELETE 13 STREET ADDRESS ORLANDO FL DELETE 14 TITLE DELETE 15 TURNER, EDITH S300 EAST GRANT STREET ORLANDO FL DELETE JURNER, EDITH S300 EAST GRANT STREET ORLANDO FL DELETE JURNER, EDITH S300 EAST GRANT STREET ORLANDO FL DELETE JURNER, EDITH S300 EAST GRANT STREET ORLANDO FL JURNER, EDITH JURNER, ELTH JURNER, EDITH JURNER, EDITH JURNER, EDITH JURNER, EDITH | tus Desired |
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| 28 | owes or has paid the current year Intangible y Tax due June 30. |
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| CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. 1 hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Fig. | |
| indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, F Block 13 if changed, or on an attachment with an address. | ☐ Change ☐ Addition |