FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00



Sandra B. Mortham

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Apr 21	1997	8:00am
Secret	ary o	of State

145- 0079

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 PROFIT CORPORATION ANNUAL REPORT 1997 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED Apr 21 1997 8:00ar Secretary of State			
DOCUME 1. Corporation Nam J.K. KESSLI Principal Place of B 8806 E 11TH AVE TAMPA FL 33605	ER & ASSOCIATES	` '			
20 20 20 21				Date Incorporated or Qualified 12/01/1964	3a. Date of Last Report 04/18/1996
2. Principal Place c	f Business	2a. Mailing Address		4. FEI Number	Applied For
Sulte, Apt. #, etc		26 Suite, Apt. #, etc.		59-1061139	Not Applica \$8.75 Additional
22		27		6. Certificate of Status Desired	Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	
4	25 Name and Address of Co		30	Florida Statutes 10. Name and Address of New R	Yes No
11. Pursuant to the	provisions of Sections 607	.0502 and 607.1508, Florida Statute State of Florida. Such change was a phinations of Bection 607.0505, Flo	es, the above-named con	poration submits this statement for the	purpose of changing its registe
•	illiar with, and acrept the c	oplinations of Section 607.0505, Flo	rida Statutes.	ation's board of directors. I hereby acco	pt the appointment as registere
SIGNATURE Sign	re, typod or printed name of register	ed agent and life if applicable (NOTE	Hogistered Agent signature req	Jired whon reinstaling)	DATE
SIGNATURE	(A) Typod or primed name of register OFFICERS	Kissler			DATE
SIGNATURE SIGNATURE PS NAME KE	6. Typod or printed name of registed OFFICERS T SSLER, JULIAN K.	ed agent and life if applicable (NOTE S AND DIRECTORS	Registered Agent signature requirements	Jired whon reinstaling)	DATE CERS AND DIRECTORS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS 310	OFFICERS T SSLER, JULIAN K. D1 WESSON WAY	ed agent and life if applicable (NOTE S AND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STHEET ADDRESS	Jired whon reinstaling)	DATE CERS AND DIRECTORS IN 12
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14. I do hereby certify that the information supplied with this filing 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 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.