

1-1597 B- 0162-C

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

FILED

Jan 15 1997 8:00am
Secretary of StatePROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 328416

(3)

1. Corporation Name

K. C. BAR B.Q., INC.

Principal Place of Business

4610 SAN JUAN AVE.
JACKSONVILLE FL 32210

Mailing Address

P.O. Box 7689
4610 SAN JUAN AVE.
JACKSONVILLE FL 32238
32238

3. Date Incorporated or Qualified

04/04/1968

3a. Date of Last Report

01/30/1996

4. FEI Number

59-1207966

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

24

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

9. Name and Address of Current Registered Agent

GUTMAN, ARTHUR J
3733 UNIVERSITY BLVD W #208
JACKSONVILLE FL 32217

10. Name and Address of New Registered Agent

81

Name

PEGGY F. TALBERT, ST/D

82

Street Address (P.O. Box Number is Not Acceptable)

4610 SAN JUAN AV.

83

84

City

JACKSONVILLE

FL

85 Zip Code

32210

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

Peggy F. Talbert, ST/D

1/7/97

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME TALBERT, K.C.

STREET ADDRESS 4610 SAN JUAN AV

CITY - ST - ZIP JACKSONVILLE FL

TITLE ST ☐ DELETE

NAME TALBERT, PEGGY F

STREET ADDRESS 4610 SAN JUAN AV

CITY - ST - ZIP JACKSONVILLE FL

TITLE D ☐ DELETE

NAME TALBERT, PEGGY F.

STREET ADDRESS 4610 SAN JUAN AVE.

CITY - ST - ZIP JACKSONVILLE FL

TITLE VD ☒ DELETE

NAME GUTMAN, ARTHUR J.

STREET ADDRESS 11501 OLD ST. AUGUSTINE ROAD #42

CITY - ST - ZIP JACKSONVILLE FL

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

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

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.

SIGNATURE:

Peggy F. Talbert, ST/D

1/7/97 904-3893561

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1132

Daytime Phone #

CR2E034 (9/96)