

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

FILED

Feb 25 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 453764 (3)  
1. Corporation Name  
K.M.T., INC.

Principal Place of Business 7103 HWY 77 SOUTHPORT FL 32409 US	Mailing Address P.O. BOX 69 LYNN HAVEN FL 3244 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/28/1974	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-1533588	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

CHATONEY, BILL  
1705 ALABAMA AVE.  
LYNN HAVEN FL 32444

Registered agent is  
the same Bill Chatoney.  
Address changed.

10. Name and Address of New Registered Agent

81	Name Chatoney, Bill
82	Street Address (P.O. Box Number is Not Acceptable) 7103 Hwy 77
83	
84	City Southport
85	Zip Code FL 32409

11. Pursuant to the provisions of Sections 607.0402 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

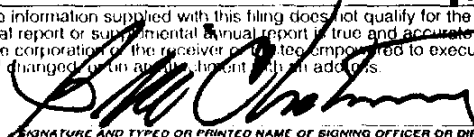
TITLE	V	<input type="checkbox"/> DELETE
NAME	CHATONEY, MICHAEL	
STREET ADDRESS	BUCHANAN STREET	
CITY-ST-ZIP	SOUTHPORT FL	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	CHATONEY, ELIZABETH D	
STREET ADDRESS	BUCHANAN STREET	
CITY-ST-ZIP	SOUTHPORT FL	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	CHATONEY, BILL	
STREET ADDRESS	1705 ALABAMA AVE	
CITY-ST-ZIP	LYNN HAVEN, FL 0	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	Chairman of the Board
3.2 NAME	Chatoney, Bill
3.3 STREET ADDRESS	Grassy Point Road
3.4 CITY-ST-ZIP	Southport, Florida 32409
4.1 TITLE	President
4.2 NAME	Billie K. Chatoney
4.3 STREET ADDRESS	Grassy Point Road
4.4 CITY-ST-ZIP	Southport, Florida 32409
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I 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 in an addition, deletion, or addition.

SIGNATURE:



SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-19-98

Date

850-265-2117

Daytime Phone #

0016068

CR2E034 (10/97)