## 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

DOCUMENT # 491627

(6)

K & K VENTURES, INC.

## FILED Apr 02 1997 8:00am Secretary of State



						'(B)	
Principal Place of Business Mailing Address					* 1-4011 0101- 1-101 6111- 1-101 6111- 1-101 6101 6		
163 S. Tamiami Trail Osprey Fl. 34229		163 S. Tamiami trail Osprey Fl <b>34</b> 229-9211					
					Date Incorporated or Qualified     11/25/1975	3a. Date of Last Report 02/27/1996	
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address		4. FEI Number	Applied For	
21		26	26		59-1634442 Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	<b>├</b> -┐ '		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred	
City & State		City & State	City & State		6. Election Campaign Financing	<b>\$5.00</b> May Bo	
23	28				Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Cou	ntry	8. This corporation has liability for in		
24		25   29   30   Name and Address of Current Registered Agent			Florida Statutes Yes No  10. Name and Address of New Registered Agent		
4215.100	<del></del>	Jurient Registered Agent		81 Name	10. Name and Address of New Heg	Istered Agent	
	Z. LARRY			INAME			
	RED BAY WAY		82 Street Ad		ress (P.O. Box Number is Not Acceptable	e)	
SAR	ASOTA FL 34241		}	В3			
				84 City		FL 85 Zip Code	
11. Pursuant office or ragent. La	to the provisions of Sections 60 registered agent, or both, in the im familiar with, and accept the	07.0502 and 607.1508, Florida Sta State of Florida Such change wa obligations of, Section 607.0505,	itutes, the at as authorized Florida Stati	ove-named corp by the corporal ites.	poration submits this statement for the pution's board of directors. I hereby accep	rpose of changing its registered the appointment as registered	
SIGNATURE	Signature, typod or printed name of registe	nred arout and title II and calle	VOTE: Boo stored	Agent signature regul	tred when reinstating)	DATE	
12.		RS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE		
TITLE	P	DELETE	1.1 TH	ır		Change Addition	
NAME	KINTZ, LARRY L	1.2 N/		ME			
STREET ADDRESS	4674 RED BAY WAY	1.3 \$		REET ADDRESS			
CITY-ST-ZIP	SARASOTA FL	1,4 0		Y-S1-ZIP		Ì	
TITLE	V	DELETE 2.1 1/		LE		Change Addition	
NAME	KEMP, HAROLD L	2.2 N		ME			
STREET ADDRESS	DO DOVERD MA		2.3 ST	REET ADDRESS			
CITY-ST-ZIP	OSPREY FL			IY-S1-7IP			
TITLE .	\$	DELETE 3.1111			W	Change Addition	
NAME	KINTZ, ROSIE G		3.2 NA	ME }			
STREET ADDRESS	4674 RED BAY WAY		3.3 S1	REET ADDRESS			
CITY-ST-ZIP	SARASOTA FL			IY-ST-ZIP			
TITLE	1	☐ DELETE	4.1 10			☐ Change ☐ Addillon	
NAME	KEMP, VIVIAN C.		4. 2 NA	.ME			
STREET ADDRESS	P.O. BOX 546, NA		4.3 \$18	REET ADDRESS			
CITY-ST-ZIP	OSPREY FL		4.4 00	Y-S1-ZIP		}	
TITLE	D	DELETE	5.1 10	lf		Change Addition	
NAME	DOZIER, THOMAS A.		5.2 NA	ME .			
STREET ADDRESS	2407 FRUITVILLE RD.		53 S11	REET ADDRESS			
CITY-ST-ZIP	SARASOTA FL		54 CIT	Y-S1-ZIP			
TITLE		☐ DELFTE	61717			Change Addition	
NAME			6.2 NA	Mξ			
STREET ADDRESS			6.3 \$11	REET ADDRESS			
CITY-ST-ZIP				Y - \$1 - ZIP			
## Late 6 - 1					6	· ,	

I do nereby 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 is true and accurate and that my signature shall have the same legal effect as if made under eath; 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.

CICNATUDE.

2.16-67

(941) 924-45-20