

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 626230 (7)

1. Corporation Name

KITCHENS AND BATH BY NEAL, INC.



Principal Place of Business

Mailing Address

537 NORTH MAGNOLIA AVENUE
ORLANDO FL 32801

537 NORTH MAGNOLIA AVENUE
ORLANDO FL 32801

2. Principal Place of Business

2a. Mailing Address

21 3350 N.W. BOCA RATON BLVD

26 3350 N.W. BOCA RATON BLVD

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 SUITE B22

27 B22

City & State

City & State

23 BOCA RATON, FLA

28 BOCA RATON FLA

24 Zip

Country

Zip

Country

24 33431

25 PALM BEACH

29 33431

30 P.BEACH

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

06/15/1979

3a. Date of Last Report

06/26/1995

4. FEI Number

59-1920117

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

HULL, NORMAN L
537 NORTH MAGNOLIA AVENUE
ORLANDO FL 32801

10. Name and Address of New Registered Agent

81 Name

NEAL NOWEND

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

3350 N.W. BOCA RATON BLVD - B22

83

84 City

BOCA RATON

FL

85 Zip Code

33431

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

NEAL NOWEND, PRES

(Signature, typed or printed name of registered agent and agent's address)

(NOTE: Registered Agent signature required when reinstating)

DATE

1-19-96

12. OFFICERS AND DIRECTORS

TITLE

PS

☒ DELETE

NAME

NOWEND, NEAL E

STREET ADDRESS

UNIT 9, BY-THE-SEA SAVANNAH GRAND CAYMAN

CITY-STATE-ZIP

CAYMAN ISLANDS CI

TITLE

VT

☒ DELETE

NAME

NOWEND, CHERI J

STREET ADDRESS

UNIT 9, BY-THE-SEA SAVANNAH GRAND CAYMAN

CITY-STATE-ZIP

CAYMAN ISLANDS CI

TITLE

P.S.

☐ DELETE

NAME

NOWEND, NEAL E

STREET ADDRESS

5840 TOWN DAY RD #231

CITY-STATE-ZIP

BOCA RATON, FL 33486

TITLE

VT

☐ DELETE

NAME

NOWEND, CHERI J

STREET ADDRESS

5840 TOWN DAY RD #231

CITY-STATE-ZIP

BOCA RATON, FL 33486

TITLE

☐ DELETE

NAME

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STREET ADDRESS

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STREET ADDRESS

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CITY-STATE-ZIP

☐ DELETE

TITLE

☐ DELETE

NAME

☐ DELETE

STREET ADDRESS

☐ DELETE

CITY-STATE-ZIP

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change

☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

☐ Change

☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

☐ Change

☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

6.5 CITY-STATE-ZIP

300001743293

-03/14/96--01077--087

***200.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN 19, 96

407-338-717

Date

Daytime Phone #

CR2E034 (12/95)