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

**PROFIT** CORPORATION ANNUAL REPORT 1999

KENT-CARROLL CORP.

DOCUMENT # 6331.17



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **FILED** May 01, 1999 8:00 am Secretary of State

05-01-1999 90040 001 \*\*\*150.00



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Principal Place of Business Mailing Address								
3711 5TH AVE NO ST. PETERSBURG FL 33713 US		1244 COUNTRY CLUB ROAD NORTH ST. PETERSBURG FL 33710-4425			DO NOT WRITE IN 1	THIS SPACE_		
•	,					3. Date Incorporated or Qualifed		
						08/17/1979		
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	<del></del>	pplied For
21		26 -		<del></del>		59-1934179		ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certifcate of Status Desired		Additional lequired
City & State		City & State			6. Election Campaign Financing	\$5.00	May Be	
23	·	28				Trust Fund Contribution	Added	to Fees
Zip 24	Country 25		¬			8. This corporation owes the current year Intangible Personal Property Tax.		
<u></u>	9. Name and Address of Current	<del></del>				10. Name and Address of New Registe	red Agent	
			81	Name				
CARROLL, KENTON L. 1244 COUNTRY CLUB ROAD N.			82	Street A	Address	ess (P.O. Box Number is Not Acceptable)		
	PETERSBURG FL 33710		83					
								Code
			84	City			FLITT	Code
office or n	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligati	of Florida. Such change was author	rized by '	tne como	corpora ration's	tion submits this statement for the purpose board of directors. I hereby accept the a	e of changing its ppointment as re	s registered egistered
SIGNATURE								
	Signature, typed or printed name of registered agent			t signature rec	quired wh	en reinstating) DAT		OD9 IN 12
12.	OFFICERS ANI		13	<del></del>		ADDITIONS/CHANGES TO OFFICER	S AND DIRECT	
TITLE	PTD		1.1 TITLE	1				]
NAME	CARROLL, KENTON L.		1.2 NAME	•				
STREET ADDRESS			1.3 STREE?	1				ļ
CITY-ST-ZIP	ST. PETERSBURG FL		1.4 CITY-ST	-ZIP			< ☐ Change	Addition
TITLE	VSD	<del></del>	2.1 TITLE	-		·	· 🗀 Change	L Addition
NAME !	CARROLL, DIANNE D.	1	2.2 NAME					
STREET ADDRESS	1247 Obolitiin Ozob no		2.3 STREET	ADDRESS	*	•	•	
CITY-ST-ZIP			2.4 CITY-S	T-ZIP			Change	Addition
TITLE		_	3.1 TITLE				□ Cilange	
NAME		32		- (				Ì
STREET ADDRESS			3.3 STREET	ADDRESS				
CITY-ST-ZIP			3.4. CITY-S	T-ZIP			☐ Change	Addition
TITLE (			4.1 TITLE	ľ		•	change	
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET				•	Ì
CITY-ST-ZIP			4.4 CITY-ST 5.1 TITLE	1-282	<del></del>		□ Change	Addition
TITLE			5.2 NAME	ł			_, -,,-,,90	
NAME			5.3 STREET	ADDRESS				
STREET ADDRESS			5.4 CITY-ST					ľ
CITY-ST-ZIP			6.1 TITLE	1 - 4JF			☐ Change	Addition
TITLE	公司 2017年 12 MIT S NOT	□ 0ccc	6.2 NAME					
NAME	Calendary Company	ľ	6.3 STREET	ADDRESS				ľ
STREET ADDRESS	16 Tr 2 2 2 1	1	U.S STREET	ALUKESS				

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 trystee 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 from a state of the corporation of the receiver or trystee empowered.

SIGNATURE: